114000067012

(M3-48564	
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
	·	•
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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J. Strivers APR 2 4 2014

COVER LETTER

то:	Registration S Division of Co			
SUBJ	ECT: HUINC	ARL, LLC		
		(Name o	of Resulting Florida Lim	ited Company)
				and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this matter to:	
CHR	ISTIAM CARE	ENAS, ESQ.		
-		(Contact Person)		
LOUI	S A. SUPRAS	SKI, P.A.		
		(Firm/Company)		
2450	NE MIAMI GA	ARDENS DR. 2ND F	LOOR	
		(Address)		
MIAN	11, FL 33180			
	(0	City, State and Zip Code)		
CAR	LOSACUELLO	O@GMAIL.COM		
E-n	nail Address: (to be	e used for future annual re	port notifications)	
For fu	rther information	on concerning this ma	tter, please call:	
LOUI	S A. SUPRAS	SKI, ESQ.	at (305) 79	2-0060
	(Name of Conta-	ct Person)		Paytime Telephone Number)
Enclo	sed is a check for	or the following amou	nt:	
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles inization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Regist Divisi Clifto 2661	ET ADDRESS tration Section on of Corporati n Building Executive Center tassee, FL 3230	ons er Circle	Registration of P. O. Box 6	Corporations

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of FLORIDA
06/04/2013 (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
HUINCARL, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Page 1 of 2

Signed this 16th day of APRIL	. 20 <u>14</u>
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Printed Name: CARLOS A. CUELLO	Title: AMBR
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]
Signature: Printed Name: CARLOS A. CÜELLO	_ Title: PD
Signature: Printed Name:	Title:
Signature:Printed Name:	
Signature: Printed Name:	
Signature:Printed Name:	
Signature: Printed Name:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
HUINCARL, LLC	
(Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ADMICUD II. A 2 locate	
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:
The maning address and street address of the prin	norpal office of the Elimited Elaomity Company is.
Principal Office Address:	Mailing Address:
2080 S. OCEAN DRIVE	2450 NE MIAMI GARDENS DR.
SUITE-1008	2ND FLOOR
HALLANDALÉ BEACH, FL 33009	MIAMI, FL 33180
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an individual or another
	8.51-1-1 4.61-11 11-11
CARLOS A. CUELLO	
Name	
2080 S. OCEAN DRIVE, S	SUITE-1008
Florida street address (P.O.	
HALL AND ALE BEACH	ri 22000
HALLANDALE BEACH City	<u>FL 33009</u> Zip
Chy	Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete pe	ul.
vePipreren v Perur a piPiu	(
(CONTINU	JED)

Page 1 of 2

Company.	
Title: "AMBR" = Authorized Member	Name and Address: er
"MGR" = Manager AMBR	CARLOS A. CUELLO
AMDIC	2080 S. OCEAN DRIVE, SUITE-1008
	HALLANDALE BEACH, FL 33009
AMBR	MARIANA I. CUELLO
	2080 S. OCEAN DRIVE, SUITE-1008
	HALLANDALE BEACH, FL 33009
AMBR	JAVIER C. CUELLO
	2080 S. OCEAN DRIVE, SUITE-1008
	HALLANDALE BEACH, FL 33009
AMBR	MARIA L. CUELLO
	2080 S. OCEAN DRIVE, SUITE-1008
	HALLANDALE BEACH, FL 33009
90 days after the date of filing.) ICLE VI: Other provisions, if any	·.
REQUIRED SIGNATURE:	AA 1
	t SHIN
(In accordance with section 605.0	nember or an authorized representative of a member. 2003 (1) (b), Florida Statutes, the execution of this document he penalties of perjury that the facts stated herein are true.
	tion submitted in a document to the Department of State is provided for in s.817.155, F.S.)
constitutes a third degree felony a	s provided for in s.817.155, F.S.)
	s provided for in s.817.155, F.S.)
constitutes a third degree felony a	s provided for in s.817.155, F.S.)

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)
Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Title:

AMBR

Name and Address:

MARIA DEL ROSARIO GARCIA

2080 S. OCEAN DRIVE, SUITE-1008

HALLANDALE BEACH, FL 33009