L14000072736

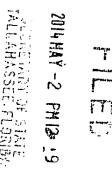
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
	4 5	
_ ·	siness Entity Nam	
P11	- 1 4 8 1 current Number)	7
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
		į
	MAY -5 2	2014
	A. LUN	1T
_		

Office Use Only



000257461810

04/16/14--01004--009 **198.75



COVER LETTER

Division of C	Corporations								
SURJECT. OVERS	SEAS EQUIPMENT	SUF	PLY, IN	NC.					
30B0E1					Limite	d Company)	·		
						d fees are submitted to coordance with s. 605.)ther
Please return all corr	espondence concernin	g thi	s matter	to:					
MARCOS REZENI	DE								
	(Contact Person)	•				•			
CSG - CAPITAL S	ERVICES GROUP,	INC					黑点	2011	
	(Firm/Company)						<u> </u>	Ē	
446 W HILLSBOR	O BLVD						S	2014 MAY -2	m 2
	(Address)								1
DEERFIELD BEAG	CH, FL 33441							PH 120 19	į. Į
(6	City, State and Zip Code)						STATE	B	,
MARCOS@THEW	/AYGROUP.BIZ						9.00	9	
E-mail Address: (to b	e used for future annual re	port r	notification	ıs)					
For further informati	on concerning this ma	tter,	please ca	all:					
MARCOS REZENI	DE	at	954		427	-4770			
(Name of Conta	act Person)		(Area C	ode)	(Day	time Telephone Number)			
Enclosed is a check f	for the following amou	ınt:							
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	■\$155.00 Filing Fees and Certificate of Status		\$180,00 Fi d Certified			☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
STREET ADDRES	S:		MA	ILI	NG A	ADDRESS:			
Registration Section						Section			
Division of Corporat Clifton Building	ions				n of C ox 632	Corporations			
2661 Executive Cent	er Circle					FL 32314			
Tallahassee, FL 323					- , -	· — • • ·			

TO: Registration Section

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of OVERSEAS EQUIPMENT SUPPLY, INC.	of Conversion is:
(Enter Name of Other Business Entity)	201
2. The "Other Business Entity" is a CORPORATION.	2014 HAY
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	Y-2
First organized, formed or incorporated under the laws of FLORIDA	
on O2/10/2011 (Enter state, or if a non-U.S. entity, the nar (date of organization, formation or incorporation)	me of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles	s of Organization:
OVERSEAS EQUIPMENT SUPPLY, 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 9 date this document is filed by the Florida Department of State; AND 2) must be the sa date listed in the attached Articles of Organization, if an effective date is listed therein	me as the effective
5. The plan of conversion has been approved in accordance with ss. 605,1041-605,1046.	

Page 1 of 2

Signed t	this <u>13TH</u> day of <u>MARCH</u>	20 <u></u>	•	
<u>Signatu</u>	re of Authorized Representative of Lim	nited Liability Company:		
Signatur Printed 1	re of Authorized Representative: Konne	Title: PRESIDENT	-	
<u>Signatu</u>	re(s) on behalf of Other Business Entity:	[See below for required signature(s).]		
Signatur	ve: Kand of Tille Name: CONRADO A. MELLO	DOCALDENT	_	
Printed 1	Name: CONPADO A. MELLO	Title: PRESIDENT	-	
Signatur	e:			
Printed 1	e: Name:	Title:	- -	
Signatur	a.			
Printed ?	e: Name:	Title:	-	
			2014 HAY	
Signatur	e: Name:	T'A	- 50	-ب
	•			
Signatur	e: Name:		-2 ASS	1
Printed 1	Name:	Title:	- ආළු -ව	[7
Cianatum			- E & TE	1
Printed 1	e: Name:	Title:	- 986	
			- 2 m •	
	la Corporation:	065		
	e of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an Ir			
	on or other have not occur belocied, and it	neo portato mascorgo.		
<u>If Floric</u>	la General Partnership or Limited Liabil	<u>ity Partnership:</u>		
Signatur	e of one General Partner.			
	la Limited Partnership or Limited Liabili	ity Limited Partnership:		
Signatur	es of <u>ALL</u> General Partners.			
All othe				
Signatur	e of an authorized person.			
Fees:				
,	Articles of Conversion:	\$25.00		
	Fees for Florida Articles of Organization:	\$125.00		
(Certified Copy:	\$30.00 (Optional)		
(Certificate of Status:	\$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
OVERSEAS EQUIPMENT SUPPLY, LLC. (Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4700 NW BOCA RATON BLVD	SAME
STE 202 BOCA RATON, FL 33431	
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 registration. CSG - CAPITAL SERVICE Name 446 W HILLSBORO BLVD Florida street address (P.O. DEERFIELD BEACH City	gistered agent are: ES GROUP, INC.
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	CONRADO A MELO	
AMBR	4700 NW BOCA RATON BLVD STE 202	
	BOCA RATON, FL 33431	
ABMR	VINICIUS M C MAIA	
	4700 NW BOCA RATON BLVD STE 202	
	BOCA RATON, FL 33431	
	7 P	
	> -	-17
	#C →	-
	<u> </u>	i
		(Company
(Use attachment if necessary)		
(Ose attachment it necessary)	in the contract of the contrac	
an effective date is listed, the date must	***	
an effective date is listed, the date must or 90 days after the date of filing.)	e date of filing: (OPTIONAL)	
an effective date is listed, the date must or 90 days after the date of filing.)	e date of filing: (OPTIONAL)	
an effective date is listed, the date must or 90 days after the date of filing.)	e date of filing: (OPTIONAL)	
an effective date is listed, the date must or 90 days after the date of filing.) ATICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	e date of filing: (OPTIONAL) be specific and cannot be more than five business day	
an effective date is listed, the date must or 90 days after the date of filing.) ATICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	e date of filing: (OPTIONAL) be specific and cannot be more than five business day	
an effective date is listed, the date must or 90 days after the date of filing.) RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (It constitutes an affirmation under the penal I am aware that any false information su	e date of filing:	
REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (I constitutes an affirmation under the penal I am aware that any false information su constitutes a third degree felony as provided as the constitutes and the constitutes a third degree felony as provided as the constitutes a third degree felony as provided as the constitutes as the constitut	r or an authorized representative of a member. 1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true. Ibmitted in a document to the Department of State ided for in s.817.155, F.S.)	
REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (1 constitutes an affirmation under the penal I am aware that any false information su constitutes a third degree felony as province of the constitutes and the constitutes at the constitutes and the constitutes at the	r or an authorized representative of a member. 1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true. Ibmitted in a document to the Department of State ided for in s.817.155, F.S.)	
REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (1 constitutes an affirmation under the penal I am aware that any false information su constitutes a third degree felony as province of the control of the constitutes and the constitutes at the const	r or an authorized representative of a member. 1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true. Ibmitted in a document to the Department of State ided for in s.817.155, F.S.)	
REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (1) constitutes an affirmation under the penal I am aware that any false information su constitutes a third degree felony as provi	r or an authorized representative of a member. 1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true. bmitted in a document to the Department of State ided for in s.817.155, F.S.) Oped or printed name of signee	
REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (In aware that any false information su constitutes a third degree felony as province of the constitutes at the constitutes	r or an authorized representative of a member. 1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true. bmitted in a document to the Department of State ided for in s.817.155, F.S.) Oped or printed name of signee	
REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (In constitutes an affirmation under the penal I am aware that any false information su constitutes a third degree felony as province of the constitutes and the constitutes at the	r or an authorized representative of a member. 1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true. Ibmitted in a document to the Department of State ided for in s.817.155, F.S.) Oped or printed name of signee of Organization and Designation	

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

ARTICLE IV-

Page 2 of 2