# L14000080467

(Requestor's Name)	<del>-</del>
(Address)	
(Address)	
(City/State/Zip/Phone	#)
PICK-UP WAIT	MAIL
(Business Entity Name	9)
(Business Linuty Hailin	e)
(Document Number)	-
Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	
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Office Use Only



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# FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2014

ANDREA ANDRADA 1966 NE 123RD ST #119 N. MIAMI, FL 33181

SUBJECT: BLUE SUNSET CORP Ref. Number: P12000027195

We have received your document for BLUE SUNSET CORP and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The articles of organization was missing from your document.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 214A00006552

## **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations
SUBJECT: Blue Sunset LLc Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Andrea Andrada
Name of Person
Firm/Company
13499 Biscayre Blud # CUMA
North Mianu, Fl 33181
Local 2 selica eta Q coma il 2000 =
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
Poid \$100,000 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327  Street/Courier Address Registration Section Division of Corporations Division of Corporations Clifton Building
Tallahassee, FL 32314 Cinton Bunding  2661 Executive Center Circle

Tallahassee, FL 32301

### Certificate of Conversion For

# "Other Business Entity"

Into

### Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization 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 this Certificate of C	Conversi	on is:
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a Coffactive.		
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)		
First organized, formed or incorporated under the laws of FLORION		
on MARCH 30, 2012. (Enter state, or if a non-U.S. entity, the name of the	e country)	201
(date of organization, formation or incorporation)		蓮
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of O	rganiza (S)	10m:
(Enter Name of Florida Limited Liability Company)		TK.
4. If not effective on the date of filing, enter the effective date: 5/2/2014	100 100 100 100 100 100 100 100 100 100	4
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days date this document is filed by the Florida Department of State; AND 2) must be the same as date listed in the attached Articles of Organization, if an effective date is listed therein.)		

Page 1 of 2

5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Signed this 28 day of April 20 14.
Signature of Authorized Representative of Limited, Liability Company:
Signature of Authorized Representative: Method Printed Name: JOSE AZPENCIOR Title: President Director.
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]
Signature:
Printed Name: Alejando Calleja Title: Vice Chairman
Signature:
Printed Name: JOSE A ZEH a) ea Title: Charman
Signature:Title:Title:
Signature:
Signature: U/> Printed Name: Title: V/A
Signature: N/N
Printed Name: Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.
All others: Signature of an authorized person.
Fees:
Articles of Conversion: \$25.00

Page 2 of 2

\$125:00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

2014 DAR 24 AH D: 53 - SICKETARY DE STATE

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Blue Sunset Ite		
(Must end with the words "Limited Liability Company, "L.L.C.," or "LL	C.")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company	y is:	
Principal Office Address: Mailing Address:	0	
1966 Ne 123 st #119 Same as Pr	naipal	
N. Hiami, 17 33181 office Address	<u>~~</u>	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designat another business entity with an active Florida registration.)	e an individual or	
The name and the Florida street address of the registered agent are:		
19.1.1. 10.2 ch # 119		
Florida street address (P.O. Box NOT acceptable)		
N. Muami FL 33181		
City Zip		
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S		
Just		
Registered Agent's Signature (REQUIRED)	201	
(CONTINUED)		
(CONTINUED)	7. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	
Page 1 of 2		

The name and address of each per Company:	son authorized to manage and control the Limited Liability
Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	T and A D to a f
<u>AMBR</u>	Jose M. Azreli weta
	North Highi, Fl 3318)
MGR	Alejandro Calleja 1966 Ne 123 et # 110 North ruami, Fe 3318 i
Nin	iV,A
N18-	NIA.
(Use attachment if necessary)	
(If an effective date is listed, the date mu to or 90 days after the date of filing.)	the date of filing: <u>May 2, 2014</u> . (OPTIONAL) ust be specific and cannot be more than five business days prior
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	1 Suppose
	Alle / I
(In accordance with section 605/020)	ber or an authorized representative of a member.
I am aware that any false information	ber or an authorized representative of a member.  3 (1) (b), Florida Statutes, the execution of this document benalties of perjury that the facts stated herein are true.  a submitted in a document to the Department of State browided for in s.817.155, F.S.)
constitutes a third degree felony as pr	rovided for in s.817.155, F.S.)
	SE M. TEPETICUETA
Filing Fees:	
· · · · · · · · · · · · · · · · · · ·	es of Organization and Designation
of Registered Agent	
\$ 30.00 Certified Copy (Opti	·
\$ 5.00 Certificate of Status	(Optional) Page 2 of 2
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ARTICLE IV-