# L140000081197

or's Name)						
(City/State/Zip/Phone #)						
WAIT MAIL						
s Entity Name)						
(Document Number)						
Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



300258124513

03/24/14--01020--004 \*\*150.00

SECRUTARY OF STATE COURT

C. LEVVIS

MAY 20 2013

EXAMINER

## **COVER LETTER**

то:	Registration Se Division of Co			
SUBJE	CT:	PAMPA 4	LLC	
501501		(Name	of Resulting Florida Limited	Company)
The en Busine	closed Certifica ss Entity" into a	te of Conversion, At a "Florida Limited L	ticles of Organization, a iability Company" in ac	and fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	return all corres	spondence concerning	g this matter to:	
<u>-</u>	ANDREA	ANDRADA (Contact Person)		·
		(Firm/Company)	.1	
	966 NE	(Address)	# 119	•
	N. MIA	MI Flails ity, State and Zip Code)	33181	
E-m	ANDREAD ail Address: (to be	REALTOR 11 @ EM. used for future annual r	AIL. (oM eport notifications)	
For fu	rther informatio	n concerning this ma	atter, please call:	
	(Name of Contact	Aunus (1 Person)	at (GJY) Y. (Area Code) (Day	ry 6 & 3 time Telephone Number)
Enclos	sed is a check fo	or the following amo	unt:	
(\$25 for & \$125	0.00 Filing Fees r Conversion for Articles nization)	\$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 Division Clifton 2661 I	ET ADDRESS ration Section on of Corporation Building Executive Center assee, FL 3230	ons er Circle	MAILING A Registration S Division of C P. O. Box 633 Tallahassee, I	Section orporations 27

INHS11 (01/14)



March 26, 2014

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

SUBJECT: PAMPA 4 LLC Ref. Number: W14000019312

We have received your document for PAMPA 4 LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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 a general partner. If the converting entity is a limited partnership or limited liability limited 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.

You must submit Articles of Organization for the resulting Florida limited liability company along with the Certificate of Conversion. The Articles of Organization must be signed by a member or an authorized representative of a member.

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) 245-6050.

Letter Number: 314A00006512

Carolyn Lewis Regulatory Specialist II

### **COVER LETTER**

Division of Corporations
SUBJECT: PAMPA 4 LLC (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Andrea Andrada
(Contact Person)
13499 Bis cayne Blud#m4
North Many Ff 33181  (City, State and Zip Code)
Jose az pelicueta Ogmail. EOM E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Michael landes at (954) 471-2275 (Accountant)  (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees

### STREET ADDRESS:

& \$125 for Articles

of Organization)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Status

### **MAILING ADDRESS:**

Certificate of Status

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

INHS11 (02/14)

APPROVEL AND FILED

# Articles of Conversion For

"Other Business Entity"

Into

### Florida Limited Liability Company

. 14 MAY -8 PH 12: 33

SECRLIARY OF STATE TALLAHASSEE, FLORIDA

The Articles 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 the Articles of Conversion is:  PAMPA 4 COPP P12000029988  (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 FL United States.  on March 28, 2012  (date of organization, formation or incorporation)  (Enter state, or if a non-U.S. entity, the name of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  PAMPA 4 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.

APPRUYES AND FILED

,	
Signed this 14 day of MARCH 20 14 14 HAY -8 PM 12: 33	
Signature of Authorized Representative of Limited Liability Company: SECRETARY OF STATE	
Signature of Authorized Representative of Limited Liability Company:  SECRETARY OF STATE ORIGINAL ALL MASSEE, PLORIDA	
Signature of Authorized Representative:	•
Printed Name: AN PUTA ANDAGAN Title: Jose Applicate Cha	rman
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]	
New A To	
Printed Name: /Jose A Velicula Title: Cha(vman)	
Timed value: 1000 1101 9x according. CVA(177(41)	
Signature:	
Printed Name: Title: Title:	
Signature:N/A	
Printed Name: Title:	
$\sim f$	
Signature: N/B Printed Name: Title: N/B	
Signature: V/N	
Printed Name: Title: W	
Signature:	
Printéd Name: Title:	
to Divide Community	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer,	
If Directors or Officers have not been selected, an Incorporator must sign.	
TOPIC CLOSE AND	
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:	
<u>1,000.</u>	
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:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

PAMPA 4 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 principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
1966 NE 123 st #/19	:same as Principal
N. MIAMI, FL 83181	office address.
A DETICAL DE LA	7 /

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Name

1966 Ne 123 st # 119

Florida street address (P.O. Box NOT acceptable)

N. M. AMI FL 3318 |

City Zip

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EECH JANKY OF STAILS

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- The name and address of each person authorized	to manage and control the Limited Liability (	14 MAY -8 PH 12: 33
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:  Hose Ayeliceelce	SECRLTARY OF STATE TALLAHASSEE, FLORIDA
	N. Mawe, Fl 3-	3 <b>1</b> 81
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing  If an effective date is listed, the date must be specific an the date of filing.)	: (OPTIC id cannot be more than five business days p	PNAL) rior to or 90 days after
ARTICLE VI: Other provisions, if any.  JNUESMENT IN WE	al Estate	,
REQUIRED SIGNATURE:	eluto	
Signature of a member or (In accordance with section 05.0203 (constitutes an affirmation under the per I am aware that any false information s constitutes a third degree felony as pro	r an authorized representative of a member (1) (b), Florida Statutes, the execution of this nalties of perjury that the facts stated herein a submitted in a document to the Department of	document are true. State

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)