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| | LLi | 705-4717 |
|-------------------------|--------------------|-----------|
| (Re | equestor's Name) | |
| (Ac | ddress) | |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (В | usiness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
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07/16/14--01005--014 **155.00



COVER LETTER

| SUBJECT: M & R INVESTMENTS, I, LLC |
|--|
| (Name of Resulting Florida Limited Company) |
| The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. |
| Please return all correspondence concerning this matter to: |
| Steven Silverman |
| Steven Silverman (Contact Person) Steven Silverman, P. A. (Firm/Company) 9655 So. Dixie Highway Svite 310 (Address) |
| 9655 So. Dixie Highway Svite 310 |
| MIAMI FL 33156 (City, State and Zip Code) |
| Steven @ stevensilverman_Com E-mail Address: (to be used for future annual report notifications) |
| For further information concerning this matter, please call: |
| Steven Silverman at (305) 666-611 (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certified Copy & \$185.00 Filing Fees, and Certified Copy & Certified Copy, and Certificate of Status |
| STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 |

Registration Section Division of Corporations

TO:

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 Conversion is: |
|--|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a Limited Liab. Lity Dartnership. (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) |
| First organized, formed or incorporated under the laws of Floveda |
| |
| on $\frac{(2 15 2005)}{(\text{date of organization, formation or incorporation)}}$. |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| MAR NVESTMENTS 1 LLC (Enter Name of Florida Limited Liability Company) |
| (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: <u>date of file of files</u> . (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; <u>AND</u> 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 day of | 20 | |
|---|--|--|
| Signature of Authorized Representative of Limi | ted Liability Company: | |
| Signature of Authorized Representative: × W/Printed Name: MANUEL RYDZ | | |
| Signature(s) on behalf of Other Business Entity: [| See below for required signature(s). | |
| Signature: X: MANNE RYDZ | <u> </u> | |
| | Title: PALTMER | • |
| Signature: X RAQUEL PYDZ Printed Name: RAQUEL PYDZ | | _ |
| Printed Name: RAQUEL PYDZ | Title: PARTNER | • |
| Signature: | | _ |
| Printed Name: | | · - |
| Signature: | | _ |
| Printed Name: | Title: | |
| Signature: | | |
| Printed Name: | Title: | |
| Signature:Printed Name: | | - |
| Printed Name: | Title: | - |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Ind | | |
| If Directors of Officers have not been selected, an inc | corporator musi sign. | |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner. | ty Partnership: | |
| If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners. | ty 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) | And the second s |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limited Liability Company is: | 4 | | |
|---|---|---|---|
| M & R NVESTMENTS (Must end with the words "Limited Liability | LLC ty Company, "L.L.C." or " | LLC.") | |
| ARTICLE II - Address: The mailing address and street address of the pri | | | Company is: |
| Principal Office Address: | Mailing Address: | | |
| 19930 NE 22 ^{NO} AVENUE MIAMI, FL 33180 | 19930 NE MIAMI, FL | 22 ^{NO} AVE 33180 | <u>-</u> |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) | Office, & Registere red Agent. You must design | d Agent's Signa | nother. |
| The name and the Florida street address of the re- | gistered agent are: | | |
| MANUEL RYDZ Name | | | ch . |
| | | | |
| 19930 NE 22" | AVENUE | <u> </u> | |
| Florida street address (P.O. | Box NOT acceptable | e) . | |
| M (AM) | FL 33 (8 Zip | <u>CO</u> | |
| City | Zip | | |
| Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete po accept the obligations of my position as regi | this certificate, I here 'y. I further agree to c erformance of my dut | by accept the app comply with the p ies, and I am fam | pointment as provisions of all iliar with and |

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

| AMBR" = Authorized Member | Name and Address: |
|---|--|
| MGR" = Manager M & R | M ANUEL RYDZ |
| 1303 | 19930 NE 22 AVENUE |
|) (a | MIAMI FL 33180 |
| MGR | RADUEL RYDZ 19930 NE 22MP AVENUE |
| | MIAML FL 33 180 |
| | · |
| | |
| | |
| | |
| | |
| Jse attachment if necessary) | |
| ective date is listed, the date must be s | e of filing: (OPTIONA pecific and cannot be more than five business of |
| ective date is listed, the date must be spays after the date of filing.) E VI: Other provisions, if any. | pecific and cannot be more than five business of |
| ective date is listed, the date must be spays after the date of filing.) E VI: Other provisions, if any. | pecific and cannot be more than five business of |
| ective date is listed, the date must be spays after the date of filing.) E VI: Other provisions, if any. | pecific and cannot be more than five business of |
| ective date is listed, the date must be spays after the date of filing.) E VI: Other provisions, if any. | pecific and cannot be more than five business of |
| ective date is listed, the date must be spays after the date of filing.) E VI: Other provisions, if any. EQUIRED SIGNATURE: | pecific and cannot be more than five business of |
| EQUIRED SIGNATURE: Signature of a member or a coordance with section 605.0203 (1) (b) itutes an affirmation under the penalties | an authorized representative of a member. Florida Statutes, the execution of this document of perjury that the facts stated herein are true. ted in a document to the Department of State |
| EQUIRED SIGNATURE: Signature of a member or a member | an authorized representative of a member. Florida Statutes, the execution of this document of perjury that the facts stated herein are true. ted in a document to the Department of State for in s.817.155, F.S.) |
| EQUIRED SIGNATURE: Signature of a member or a member | an authorized representative of a member. Florida Statutes, the execution of this document of perjury that the facts stated herein are true. ted in a document to the Department of State |
| EQUIRED SIGNATURE: Signature of a member or a member | an authorized representative of a member. Florida Statutes, the execution of this document of perjury that the facts stated herein are true. ted in a document to the Department of State for in s.817.155, F.S.) |

Page 2 of 2

ARTICLE IV-