614000170716

ودر- العرمة)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
•

Office Use Only



400266028844

11/03/14--01007--009 **155.00

SECRETARY OF STATE NOV 0 3 2014

COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: RACK + AYLES 2000 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: Donne Z. ScheFlin, Esourike ScheFlin Law Group P.A. Geirm/Company) Goden City, Florida 33024 DscheFlin @ ScheFlinlaw. com E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call: OTONIC MARTINEZ at (305), 633-1410 (Name of Contact Person) (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) \$150.00 Filing Fees and Certificate of Status \$180.00 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 Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

INHS11 (02/14)

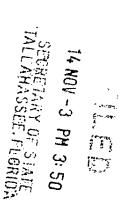
Articles of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

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: RACKTAXELS 2000, Inc.
(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 Flokida
on 12 17 1999 (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: RACK + Axels 2000 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: (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 all applicable statutes.

Page 1 of 2



Signed this 28 day of August	20_14
Signature of Authorized Representative of Limi	ted Liability Many:
Signature of Authorized Representative: Printed Name: Otonic MAR tinez	Title: AMBR
Signature(s) on Johalf of Officer Rusiness Entity:	See below for required signature(s).]
Signature: Printed Name Stongs Marking 2	Title: PRESIDENT
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	_Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilia Signatures of ALL 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)

Page 2 of 2



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of the principal office of the Limited Liability Company is:

words "Limited Liability Company,

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
4249 N.W. 37 Herre	4249 N.W. 31" Avenue
MiAMI, Florida 33142	Misni, EC 33142
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	gistered agent are:
Borne Z.Sch	eflin, EsQuire
9900 StiRlin	g Rond, Suite #301
Florida street address (P.O.	Box NOT acceptable)
Cooper City	_ _{FL} 330みり
City	Zip
liability company at the place designated in	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

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.

Page 1 of 2

(CONTINUED)

14 NOV -3 PH 3: 50
SECRETARY OF STATE
FALL ANASSEE FLORIDA

The name and address of each p Company:	
Title:	Name and Address:
"AMBR" = Authorized Membe "MGR" = Manager	Otoniel Martinez
AMBR	Gioconda Hartinez Boso NW 17 Ave
(Use attachment if necessary)	
CLE V: Effective date, if other the	nan the date of filing: (OPTIONAL) must be specific and cannot be more than five business days
CLE V: Effective date, if other the effective date is listed, the date 0 days after the date of filing.)	must be specific and cannot be more than five business days
CLE V: Effective date, if other the effective date is listed, the date to days after the date of filing.)	must be specific and cannot be more than five business days
CLE V: Effective date, if other the effective date is listed, the date 0 days after the date of filing.)	must be specific and cannot be more than five business days
CLE V: Effective date, if other the effective date is listed, the date to days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a manual in accordance with section 605.0 onstitutes an affirmation under the amaware that any false informat.	ember or an authorized representative of a member. 203 (1) (b), Florida statutes, the execution of this document e penalites of perjory that the facts stated herein are true, ion submitted in a document to the Department of State
CLE V: Effective date, if other the effective date is listed, the date to days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a multiple in accordance with section 605.0 constitutes an affirmation under the am aware that any false informationstitutes a third degree felony as	emust be specific and cannot be more than five business days emust be specific and cannot be more than five business days emust or an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true, ion submitted in a document to the Department of State is provided for in s.817.155, F.S.)
CLE V: Effective date, if other the effective date is listed, the date to days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a magnetic days affirmation under the days affirmation under the days affirmation and the days	ember or an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this document e penalities of perjory that the facts stated herein are true, ion submitted in a document to the Department of State is provided for in s.817.155, F.S.) Typed or printed name of signee icles of Organization and Designation and