U 500 0041064

	po8-	42228
(1	Requestor's Name)	
()	Address)	
(,	Address)	
(1	City/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(1)	Business Entity Name))
(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer:	

Office Use Only



700269018047

02/06/15--01012--009 **155.00

15 MAR -5 AM 9: 53

7014



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 13, 2015

JOSE PADILLA 7590 NW 186 ST STE 206A MIAMI, FL 33015

SUBJECT: INABLO, LLC Ref. Number: W15000010821

We have received your document for INABLO, LLC and your check(s) totaling \$155.00. 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.

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of 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.

Letter Number: 815A00003084

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

то:	Registration S Division of C			
SUBJ	ECT: INABLO	O, CORP.		
			of Resulting Florida Limite	d Company)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corre	espondence concernin	g this matter to:	
	JOSE	E ANTONIO PADILL	A	
		(Contact Person)		
		(Firm/Company)		
	7590	NW 186 ST STE.20	6A	
		(Address)		
	1	MIAMI FL. 33015		
	((City, State and Zip Code)		
E-n	nail Address: (to b	e used for future annual re	port notifications)	
For fu	rther information	on concerning this ma	tter, please call:	
			_at ()	
	(Name of Conta	ct Person)	(Area Code) (Day	time Telephone Number)
Enclo	sed is a check f	or the following amou	int:	
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	□\$185.00 Fiting Fees. Certified Copy, and Certificate of Status
Regis Divisi Clifto 2661	tration Section on of Corporation Building Executive Centures FL 3230	ions er Circle	MAILING A Registration S Division of C P. O. Box 633 Tallahassee, I	Section Corporations 27

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: INABLO, CORP.
(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 FLORIDA
On CH/05/2015 Y 2 V 0 f (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: INABLO, 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.)
The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2



Signed this O day of JANIJADY	20.45	
Signed this 9 day of JANUARY	20_ 10	
Signature of Authorized Representative of Limit		
Signature of Authorized Representative: Printed Name: JOSE ANTONIO PADILLA	Title: CHAIRMAN	_
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]	
Signature: Printed Name:	Dist.	_
Printed Name:	Title:	
Signature:Printed Name:	Title:	- -
Signature:		_
Printed Name:		
Signature:Printed Name:	Title:	- -
Signature:Printed Name:	Title:	<u>-</u>
Signature:Printed Name:	Title:	- -
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.		
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	~~1
All others: Signature of an authorized person.		15 Hs
Fees:		R-5
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	AM 9: 53

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
INABLO, LLC (Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
7590 NW 186 STREET STE.206A MIAMI FL 33015	7590 NW 186 STREET STE.206/ MIAMI FL 33015	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another	
The name and the Florida street address of the re	egistered agent are:	
ACCOUNTAX OFFICE S	ERVICES, CORP	
Name		
7590 NW 186 STREET S Florida street address (P.O.		
MIAMI	FL 33015	
City	FL 33015 Zip	
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of a performance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S	
Page 1 of		

Company:	
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	JOSE ANTONIO PADILLA
	18483 SW 7TH STREET
	PEMBROKE PINES FL 33029
AMBR	ANA MARIA CITTADINO PADILLA
7 WIDI	18483 SW 7TH STREET
	PEMBROKE PINES FL 33029
	TEMOROTE INTEGER OF THE OUTER
AMBR	JOSE A PADILLA CITTADINO
	18483 SW 7TH STREET
	PEMBROKE PINES FL 33029
AMBR	MARIANA A PADILLA
•	18483 SW 7TH STREET
	PEMBROKE PINES FL 33029
ARTICLE V: Effective date, if other than (If an effective date is listed, the date mu to or 90 days after the date of filing.)	the date of filing: (OPTIONAL) ast be specific and cannot be more than five business days prior
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Padinav. 35
(In accordance with section 605.0203 constitutes an affirmation under the polymer of the polymer	ber or an authorized representative of a member: (1) (b), Florida Statutes, the execution of this document enalties of perjury that the facts stated herein are true. submitted in a document to the Department of State
Filing Fees:	

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

ARTICLE IV-

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)