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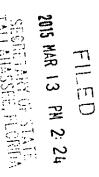
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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#### **COVER LETTER**

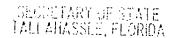
TO: Registration S Division of C					
SUBJECT: 417 SC	UTHBAY INC.				
	(Name	of Resulting Florida	Limite	d Company)	
		_		d fees are submitted to concordance with s. 605.104	
Please return all corre	espondence concernin	g this matter to:			
Alvaro Castillo					
	(Contact Person)				
Castillo & Associat	es				
	(Firm/Company)				
1390 Brickell Aven	ue Suite 200				
	(Address)				
Miami, FL 33131					
······	City, State and Zip Code)				
alvaro@alvarocast	• • • • • • • • • • • • • • • • • • • •				
	e used for future annual re	port notifications)			
		-			
For further information	on concerning this ma	•			
Alvaro Castillo		_at (305	371	-5540	
(Name of Conta	ct Person)		(Day	time Telephone Number)	
Enclosed is a check f	or the following amou	int:			
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS	S:	MAILI	NG A	ADDRESS:	
Registration Section		Registra			
Division of Corporat	ions			Corporations	
Clifton Building 2661 Executive Cent	ar Cirola	P. O. Bo		27 FL 32314	
ZURLI EXECULIVE V.C.III	KI VIIKIE	1 80180181	115	1:1: 37.31 <b>4</b>	

Tallahassee, FL 32301

FILED

#### 2015 MAR 13 PM 2: 24

## 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: 417 SOUTHBAY 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 FLORIDA
05/03/2006 (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:
417 SOUTHBAY 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 all applicable statutes.

Page 1 of 2

Signed this 12th day of March	20 <u>15</u> .
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name:	Title:
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).]
Signature: Printed Name: Alvaro Castillo	Title: Manager
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	Title
Signature: Printed Name:	
Printed Name:Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of If Directors or Officers have not been selected, an Inc.  If Florida General Partnership or Limited Liability	corporator must sign.
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
417 SOUTHBAY 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 prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1390 Brickell Avenue Suite 200 Miami, FL 33131	1390 Brickell Avenue Suite 200 Miami, FL 33131
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:
Alvaro Castillo B., PA	
Name	
1390 Brickell Avenue Suite	
Florida street address (P.O.	Box <u>NOT</u> acceptable)
Miami	FL 33131
City	Zip
liability company at the place designated in a registered agent and agree to act in this capacit statutes relating to the proper and complete pe	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 erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S
	mls
Registered Agent's Signa	nure (REQUIRED)
(CONTINU	JED)

Page 1 of 2

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	ACB Management Services Inc.		
	1390 Brickell Avenue Suite 200		
	Miami, FL 33131		
(Use attachment if necessary)			
ricle V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.)	date of filing: (OPTIONAL)  ne specific and cannot be more than five business day	) ys pri	ic
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