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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
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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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15 APR 21 PM L: 58
SEGRETARY OF STABE
TALLAHASSEE, FLORIDA



COVER LETTER

Division of Corp							
SUBJECT: FIAMONT	E INTERNATION	AL LLC					
Sebage 1.		of Resulting Florida	Limite	ed Company)			
The enclosed Articles of Business Entity" into a '	'Florida Limited Li	ability Company					Other
MASSIMO GIANNOL	A						
	Contact Person)	· · · · - - · ·					
(Firm/Company)						
8835 NW 100 PL			_		TAL SE	15	
	(Address)		,			<u></u>	धारम्ब इ
DORAL, FL 33178						-50 -20	T COMPANY
(City	, State and Zip Code)				<u>ळ</u> ळ ल-र		grammer B
INFO@MARTINACC	DUNTING-TAX.C	ОМ				77	3
E-mail Address: (to be us	ed for future annual re	port notifications)			101 V S	PM 1:: 59	E TOLKE
For further information	concerning this ma	ter, please call:			III) A	8. S.	Co market
MASSIMO GIANNOL	A	at (786	،487	-6711			
(Name of Contact P	'erson)		.) (Day	time Telephone Number)			
Enclosed is a check for t	the following amou	nt:					
(\$25 for Conversion an	\$155.00 Filing Fees d Certificate of atus	S180.00 Filing and Certified Cop		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status			
STREET ADDRESS:		MAIL	NG A	ADDRESS:			
Registration Section		Registr					
Division of Corporations	S	Divisio	n of C	Corporations			
Clifton Building	7' 1	P. O. B	ox 63	27			

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2015

MASSIMO GIANNOLA 8835 NW 100 PL DORAL, FL 33178

SUBJECT: FIAMONTE INTERNATIONAL LLC

Ref. Number: W15000021644

We have received your document for FIAMONTE INTERNATIONAL 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):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

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) 245-6051.

Letter Number: 215A00006219

Tim Burch Regulatory Specialist II

www.sunbiz.org

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.

Statutes.	
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of FIAMONTE INTERNATIONAL, INC.	of Conversion is:
(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 05/28/2009 (Enter state, or if a non-U.S. entity, the nar (date of organization, formation or incorporation)	ne of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles FIAMONTE INTERNATIONAL LLC	s of Organization:
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: 04/21/15 (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 9 date this document is filed by the Florida Department of State; AND 2) must be the sa date listed in the attached Articles of Organization, if an effective date is listed therein	ime as the effective
5. The plan of conversion has been approved in accordance with all applicable statutes.	ACT 5
Page 1 of 2	APR 21 PH 11: E

61	
Signed this 21 day of April	_ 20 <u>15</u> .
Signature of Authorized Representative of Limi	ted Liability Company:
1/	Luk. L
Signature of Authorized Representative: A Printed Name: MASSIMO GIANNOLA	
Printed Name: MASSIMO GIANNOLA	Title AMBR
Timica rame.	_/
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).
A / Law Law /	see selow for required signature (s),
Signature: \\	
Signature: ^ Printed Name: MASSIMO GIANNOLA	Title: AMBR
Timed Traines	
Signature:	
Signature:Printed Name:	Title:
Timed tvame.	
Signature:	
Signature: Printed Name:	Title
Timed Name.	11110.
Signature:	
Printed Name:	Title
Timed Name.	
Signature:	
Printed Name:	Title
Timed Name.	
Signature:	
Printed Name:	Title
Timed (value.	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an Inc	corporator must sign
If Directors of Officers have not been selected, an inc	corporator must sign.
If Florida Conoral Doutnorship or Limited Liabili	ty Dartnarchine
If Florida General Partnership or Limited Liabili	iv raithership.
Signature of one General Partner.	
If Florida I instead Dentarrankin on I imited I inhibi	t. I imited Dantmarshin.
If Florida Limited Partnership or Limited Liability	
Signatures of <u>ALL</u> General Partners.	
All othours	
All others:	
Signature of an authorized person.	
Eagn	
<u>Fees:</u>	
Auditor of Community	\$25.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

15 APR 21 PH L: 51
SECRETARY OF STATE
TALLAHASSEE FLORIO

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
FIAMONTE INTERNATIONAL LLC		
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited I	Liability Company is:
Principal Office Address:	Mailing Address:	
8835 NW 100 PL DORAL, FL 33178	8835 NW 100 PL DORAL, FL 33178	
ARTICLE III - Registered Agent, Registered of 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 GIANNOLA, MASSIMO	red Agent. You must designate an indi	
Name		THE REST
8835 NW 100 PL	·	LINE STATE
Florida street address (P.O.	Box NOT acceptable)	S & RIBA
DORAL	FL 33178	
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 capacity statutes relating to the proper and complete per accept the obligations of my position as region Registered Agent's Signal (CONTINE)	this certificate, I hereby accepty. I further agree to comply verformance of my duties, and interest agent as provided for interest (REQUIRED)	ot the appointment as vith the provisions of all I am familiar with and

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
AMBR	GIANNOLA, MASSIMO	
	8835 NW 100 PL	<u>. </u>
	DORAL, FL 33178	
AMBR	CHIRICO, MAGDALENA	
	8835 NW 100 PL	
	DORAL, FL 33178	·
		As -
- · · · · · · · · · · · · · · · · · · ·		5 5
		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	-	
		<u> </u>
(Use attachment if necessary)		DA GO
CLEV. Effective data if other than th	e date of filing: 4/2//15	(ODTIONAL)
	be specific and cannot be more than	
90 days after the date of filing.)	be specific and cannot be more than	live business days
CLE VI: Other provisions, if any.		

Signature/of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Massimo Giannola
Typed or printed name of signee

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)