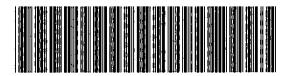
# L15000090123

		511-810
(Re	equestor's Name)	
(Ad	dress)	<u>.</u>
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

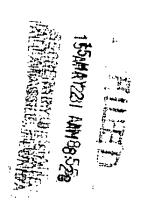
Office Use Only



700272141997

04/24/15--01038--009 \*\*125.00

05/21/15--01002--001 \*\*25.00



MAY 2.2 2015



May 5, 2015

ANNETTE MOTA 3419 GALT OCENA DR SUITE A FT LAUDERDALE, FL 33308

SUBJECT: PRESTIGE MAINTENANCE AND CONTRACTING, LLC

Ref. Number: W15000030667

We have received your document for PRESTIGE MAINTENANCE AND CONTRACTING, LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$25.00.

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: 115A00008922

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: PRESTIGE MAINTENANCE AND CONTRACTING, INC.
(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:
ANNETTE MOTA
(Contact Person)
API PROCESSING LICENSING INC
(Firm/Company)
3419 GALT OCENA DRIVE SUITE A
(Address)
FORT LAUDERDALE FL 33308
(City, State and Zip Code)
ANNETTE@APIPROCESSING.COM
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
ANNETTE MOTA at ( 954 )567-0013
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$150.00 Filing Fees and Certificate of Status of Organization)  \$150.00 Filing Fees and Certified Copy  \$180.00 Filing Fees and Certified Copy  Certified Copy, and Certificate of Status
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations  Clifton Building  Division of Corporations  P. O. Box 6327
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

# 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.

s Entity" immediately prior to the filing of the ID CONTRACTING, INC.	Articles of Conversion is:
er Name of Other Business Entity)	
INC.	<u> </u>
(Enter entity type. Example: corporation, limited parti- general partnership, common law or business trust,	ership, etc.)
ated under the laws of FLORIDA	
(Enter state, or it a non-O.S. en	tity, the name of the country)
orporation)	
Liability Company as set forth in the attache	d Articles of Organization:
ID CONTRACTING, LLC	
of Florida Limited Liability Company)	<del></del> '
ing, enter the effective date:  prior to date of receipt or filed date nor mo Florida Department of State; AND 2) must s of Organization, if an effective date is liste	re than 90 days after the be the same as the effective
approved in accordance with all applicable sta	tutes.
Page 1 of 2	ACC.
	ED CONTRACTING, INC.  The Name of Other Business Entity)  INC.  (Enter entity type. Example: corporation, limited particular general partnership, common law or business trust, atted under the laws of Enter state, or if a non-U.S. enterporation)  Liability Company as set forth in the attached of Florida Limited Liability Company)  Inc.  The Contracting of Enter state in the attached of Florida Limited Liability Company)  The Contracting of Florida Limited Liability Company)

Title:		Name and Address:	
"AMBR" = Authori	ized Member	Tranic and whateas:	
"MGR" = Manager			
MGR		PAUL CARRABBA, JR.	• ′
	•	5100 SW 90TH AVENUE SUIT	E 202
	·	FORT LAUDERDALE, FL 3332	
MGR		PAUL CARRABBA	<del>,</del>
TTUK	•		
		5100 SW GOTH AVENUE	<u>Suite 20</u> 2
		FORT LAUDERDALE, FL	33328
	•		
			· ·
•			
			T#: 1.
		<del></del>	
LE V: Effective date Mective date is listed	e, if other than the	date of filing: be specific and cannot be more than fi	_ (OPTIONAL) ve business day
(Use attachment if n  LE V: Effective date  ffective date is listed days after the date  LE VI: Other provise	e, if other than the I, the date must I of filing.)	date of filing: be specific and cannot be more than fi	
LE V: Effective date ffective date is listed days after the date	e, if other than the  I, the date must I  of filing.)  ions, if any.	date of filing: be specific and cannot be more than fi	
LE V: Effective date is listed days after the date LE VI: Other provis	e, if other than the  I, the date must I  of filing.)  ions, if any.	be specific and cannot be more than fi	
LE V: Effective date is listed days after the date LE VI: Other provis	e, if other than the  I, the date must I  of filing.)  ions, if any.	be specific and cannot be more than fi	
LE V: Effective date is listed days after the date LE VI: Other provis	e, if other than the  I, the date must I  of filing.)  ions, if any.	be specific and cannot be more than fi	
LE V: Effective date is listed days after the date LE VI: Other provision REQUIRED SIGN	e, if other than the d, the date must I of filing.) ions, if any.  ATURE:	be specific and cannot be more than fi	ve business day
LE V: Effective date is listed days after the date LE VI: Other provision REQUIRED SIGN.	e, if other than the d, the date must I of filing.) ions, if any.  ATURE:	be specific and cannot be more than fi	ve business day
LE V: Effective date is listed days after the date LE VI: Other provision REQUIRED SIGN.  Signat accordance with see	e, if other than the d, the date must i of filing.) ions, if any.  ATURE: ure of a member ction 605.0203 (1)	or an authorized representative of a ) (b), Florida Statutes, the execution of t	member
LE V: Effective date is listed days after the date LE VI: Other provise REQUIRED SIGN.  Signate accordance with sensitutes an affirmation	e, if other than the d, the date must I of filing.) ions, if any.  ATURE:  ure of a member ction 605.0203 (1) on under the pena	or an authorized representative of a ) (b), Florida Statutes, the execution of the state of perjury that the facts stated here.	member this documents to are to
LE V: Effective date is listed days after the date LE VI: Other provision Signates accordance with security aware that any false.	e, if other than the d, the date must I of filing.) ions, if any.  ATURE: ure of a member ction 605.0203 (1) on under the penalse information sub	or an authorized representative of a ) (b), Florida Statutes, the execution of t	member this documents to are to
LE V: Effective date is listed days after the date LE VI: Other provision Signates accordance with security aware that any false.	e, if other than the d, the date must it of filing.) ions, if any.  ATURE:  ure of a member ction 605.0203 (1) on under the penalse information subset felony as provided the date of the	or an authorized representative of a ) (b), Florida Statutes, the execution of the lities of perjury that the facts stated here to be in a document to the Department ded for in s.817.155, F.S.)	member tof Star 90
LE V: Effective date is listed days after the date LE VI: Other provision Signates accordance with security aware that any false.	e, if other than the d, the date must it of filing.) ions, if any.  ATURE:  ure of a member ction 605.0203 (1) on under the penalse information subset felony as provided.	or an authorized representative of a ) (b), Florida Statutes, the execution of the lities of perjury that the facts stated here to be or in s.817.155, F.S.)  PAUL CARRABBA,	member tof Star go
LE V: Effective date is listed days after the date LE VI: Other provision Signates accordance with security aware that any false.	e, if other than the d, the date must it of filing.) ions, if any.  ATURE:  ure of a member ction 605.0203 (1) on under the penalse information subset felony as provided.	or an authorized representative of a ) (b), Florida Statutes, the execution of the lities of perjury that the facts stated here to be in a document to the Department ded for in s.817.155, F.S.)	member tof Star 20
LE V: Effective date is listed days after the date LE VI: Other provision of the provision	e, if other than the d, the date must it of filing.) ions, if any.  ATURE:  ure of a member ction 605.0203 (1) on under the penalse information subset felony as provided.	or an authorized representative of a ) (b), Florida Statutes, the execution of the lities of perjury that the facts stated here to be or in s.817.155, F.S.)  PAUL CARRABBA,	member tof Starson
LE V: Effective date is listed days after the date LE VI: Other provision of the provision	e, if other than the d, the date must I of filing.) ions, if any.  ATURE:  Ture of a member ction 605.0203 (1) on under the penal se information subset felony as provided.	or an authorized representative of a (b), Florida Statutes, the execution of the lities of perjury that the facts stated herein the form in a document to the Department ded for in s.817.155, F.S.)  PAUL CARRABBA, ed or printed name of signee	member tof Star 20
LE V: Effective date is listed days after the date LE VI: Other provision of the provision	e, if other than the d, the date must I of filing.) ions, if any.  ATURE:  Ture of a member ction 605.0203 (1) on under the penal se information subset felony as provided.	or an authorized representative of a ) (b), Florida Statutes, the execution of the lities of perjury that the facts stated here to be or in s.817.155, F.S.)  PAUL CARRABBA,	member tof Starson

ARTICLE IV-

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTI	ICLE	I-	Name:
------	------	----	-------

The name of the Limited Liability Company is:

#### PRESTIGE MAINTENANCE AND CONTRACTING, 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 principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
5100 SW 90TH AVENUE	5100 SW 90TH AVENUE
SUITE 202	SUITE 202
FORT LAUDERDALE, FL 33328	FORT LAUDERDALE, FL 33328

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

MICHELE PARKER	•
Name	,
5100 SW 90TH AVENUE	SUITE 202
Florida street address (P.O.	Box NOT acceptable
FORT LAUDERDALE	FL 33328
City	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. 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. The

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Signed thi	s <u>07</u>	day of APRIL	20 <u>15</u>			
<u>Signature</u>	of Autho	orized Representative of Lim	ited Liability Company:			
Signature Printed Na	of Author me: <u>PAUl</u>	ized Representative:	Title: MGR			
			[See below for required signature(s).	.]		
Signature: Printed Na	me: PAU	Conflor L CARRABBA, JR	Title: _MGR.	<u></u>		
Signature:			Title:			
Printed Na	me:		Title:	<del></del>		
Signature: Printed Na	me:		Title:			
Signature: Printed Na	 me:		Title:	<del></del>		
			Title:			
			Title:			
			1 tue:	<del></del>		
	of Chairma	<u>ion:</u> an, Vice Chairman, Director, or ers have not been selected, an Ir				
		Partnership or Limited Liabil	ity Partnership:			
Signature o	of one Ger	neral Partner.		हिन्दिकी हिन्दु स्टिन्स अभिनेत्री	<b>3</b> →	
If Florida	Limited I	<mark>Partnership or Limited Liabil</mark> General Partners.	ity Limited Partnership:	60	AY 2	E AN MERCY.
		one in a control of the control of t		97 T	-	Shares
All others: Signature of		orized person.		A STATE OF THE STA	AM 8: 39	
Fees:				<b>9</b> 7	<b>6</b>	
Fee Ce			\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)			