615000164446

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



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15 SEP 23 PH 4: 19
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

Division of C	Corporations		
SUBJECT: AFJ Cons	suting LLC		
5030LC1	(Name	of Resulting Florida Limite	ed Company)
			nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
Suely Oliveira			
	(Contact Person)		
TaxPlace			
	(Firm/Company)		
1660 W Hillsboro			
	(Address)	<u> </u>	
Deerfield Beach, FL 334	42		
(6	City, State and Zip Code)		
suely@taxplace.com			
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
Francisco Lima		_at $(\frac{561}{})^{451}$	5010
(Name of Conta	nct Person)	(Area Code) (Day	vtime Telephone Number)
Enclosed is a check f	for 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 Fees and Certified Copy	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES Registration Section	S:	MAILING A Registration	
Division of Corporat	ions	Division of C	Corporations
Clifton Building	Ci-1	P. O. Box 63	
2661 Executive Cent	er Circle	Tallahassee,	FL 32314

Tallahassee, FL 32301

TO:

Registration Section



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2015

SUELY OLIVEIRA 1660 W HILLSBORO DEERFIELD BEACH, FL 33442

SUBJECT: AFJ CONSULTIONG LLC

Ref. Number: W15000059440

We have received your document for AFJ CONSULTIONG LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type in the names of the AMBR'S and MGR'S in article IV.

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) 245-6052.

Tim Burch Regulatory Specialist II Letter Number: 315A00019000

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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.

EConversion is:
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e of the country)
of Organization:
days after the me as the effective not be listed as the

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 27th day of August	20_15		
Signature of Authorized Representative of Limi	ted Liability Company:		
Signature of Authorized Representative: Francisco Lima	Title: AMBR- MGR	_	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)		
Signature: Francisco Lima Printed Name: Francisco Lima	Title: President	- -	
Signature:Printed Name:	Title:	15.6 FACE 15.0	ಕಾಬದಿ₁ <u>ಸ</u> ್ಟೆ
Signature:Printed Name:		SEP (energy E E
Printed Name:	Title:	F#4+4	in In Internal contracts
Signature:		_ 뜻으로	g å
Printed Name:	Title:	PM 1: 19 OF STATE E. FLORIDA	E ALMONDARY
Signature:		_ ***	
Printed Name:	Title:	<u></u>	
Signature:			
Printed Name:	Title:	- -	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer		
If Directors or Officers have not been selected, an Inc			
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:		
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

AFJ Consulting LLC		
	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Liah	bility Company is
		,,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Principal Office Address:	Mailing Address:	
12520 Equine Lane	12520 Equine Lane	
Wellington, FL 33414	·	
Weinigton, 1 E 33414	Wellington, FL 33414	
ARTICLE III - Registered Agent, Regis	stered Office, & Registered Agent's S	Signature:
ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its owr business entity with an active Florida registration.) The name and the Florida street address of Francisco Lima	stered Office, & Registered Agent's S	al or another 15 SEP 23
ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its owr business entity with an active Florida registration.) The name and the Florida street address of Francisco Lima	stered Office, & Registered Agent's San Registered Agent. You must designate an individue of the registered agent are:	al or another 15 SEP 23 PH
ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its owr business entity with an active Florida registration.) The name and the Florida street address of Francisco Lima 12520 Equine Lane	stered Office, & Registered Agent's San Registered Agent. You must designate an individue of the registered agent are:	al or another 15 SEP 23 PH
ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its owr business entity with an active Florida registration.) The name and the Florida street address of Francisco Lima 12520 Equine Lane	stered Office, & Registered Agent's San Registered Agent. You must designate an individue of the registered agent are: Name	al or another 15 SEP 23 PH 1: 1

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
	"MGR" = Manager			
	AMBR	Francisco Lima		
		12520 Equine Lane		
		Wellington, FL 33414		
	MGR	Francisco Lima		
		12520 Equine Lane		
		Wellington, FL 33414		
	AMBR	Alisa Lima	minist.	
		12520 Equine Lane	ट्रिलं ज	म् मुक्ताम्
		Wellington, FL 33414	A A	
	•		T>	
	MGR	Alisa Lima	တွ င်း မိ 🕻	1,144, -15-7
		12520 Equine Lane	no v	ar mark
		Wellington, FL 33414		2 E Emetane
	(Use attachment if necessary)		TATE ORNO	
	(Ose attachment if necessary)		⋗	
	ICLE V: Effective date, if other tha		(OPTIONA	•
or or te:		nust be specific and cannot be mo	(OPTIONA re than five business d	ays _I
f ar or ote: cum	ICLE V: Effective date, if other that effective date is listed, the date in 90 days after the date of filing.) If the date inserted in this block does not remarks effective date on the Department of S	nust be specific and cannot be mo	(OPTIONA re than five business d	ays _l
f ar or ote: cum	ICLE V: Effective date, if other that effective date is listed, the date in 90 days after the date of filing.) If the date inserted in this block does not remarks effective date on the Department of S	nust be specific and cannot be mo	(OPTIONA re than five business d	ays p
f ar or ote: cum	ICLE V: Effective date, if other that a effective date is listed, the date in 90 days after the date of filing.) If the date inserted in this block does not rent's effective date on the Department of SICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	nust be specific and cannot be mo	(OPTIONA re than five business d	ays p

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

ARTICLE IV-

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)

Francisco Lima - Pres. / Member / Manager

Page 2 of 2

Typed or printed name of signee