# 45000205676

Office Use Only



500279633595

FORCIL AND

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 832449 8068411

AUTHORIZATION :

COST LIMIT : \$ (1/5%\_00

ORDER DATE: October 14, 2015

ORDER TIME : 12:33 PM

ORDER NO. : 832449-010

CUSTOMER NO: 8068411

# DOMESTIC AMENDMENT FILING

NAME: MICHAEL GONZALEZ REAL ESTATE,

PΑ

EFFECTIVE DATE:

XX ARTICLES OF CONVERSION
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS:



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 2, 2015

CSC

RESUBNIT

Please give original

submission date as file date.

SUBJECT: MICHAEL GONZALEZ, LLC

Ref. Number: W15000077909

We have received your document for MICHAEL GONZALEZ, LLC and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Terri J Schroeder Regulatory Specialist II

Letter Number: 615A00025263



# 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.

ss Entity" immediately prior to the filing of the Articles of Conversion is:
nter Name of Other Business Entity)
Professional Association
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
rated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
corporation)
d Liability Company as set forth in the attached Articles of Organization:
e of Florida Limited Liability Company)
ling, enter the effective date:  e prior to date of receipt or filed date nor more than 90 days after the e Florida Department of State; AND 2) must be the same as the effective es of Organization, if an effective date is listed therein.) bes not meet the applicable statutory filing requirements, this date will not be listed as the ment of State's records.  In approved in accordance with all applicable statutes.

Page 1 of 2

15 0EC 14 AM 9: 12

Signed this 10 day of December	2015.
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: 100 Printed Name: Michael Gonzalez	Title: Member
Signature(s) on behalf of Other Business Entity:	
Signature: MLLFy	
Printed Name: Michael Gonzalez	Title: member
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Simultum	
Signature: Printed Name:	Title:
	•
Signature: Printed Name:	Title:
Signature: Printed Name:	Title
Timed Haire.	1100.
If Florida Corporation:	067.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
	· -
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of the deporter lander.	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
Digitatures of ALDI Oblicial Fatthers.	
All others: Signature of an authorized person.	
Fees:	
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	
Michael Gonzalez, LLC	
(Must end with the words "Limited Liabi	lity Company. "L.L.C.," or "LLC.")
ARTICLE II - Address:	destruction of the state of the
The maining address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10863 SW 229 St	10863 SW 229 St
Miami, FL 33170	Miami, FL 33170
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the interest of the server and the Florida street address of the interest of the server address.	tered Agent. You must designate an individual or another
Corporation Service Company	
Nam	e
1201 Hays Street	
Florida street address (P.O	
Tallahasse	FL 32301 Zip
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	o accept service of process for the above stated limited a this certificate, I hereby accept the appointment as vity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agentias provided for in Chapter 605, F.S
(CONTIN	UED)

Page 1 of 2

		** 1.11
Title:	" = Authorized Member	Name and Address:
	= Authorized Memoer = Manager	
AMBR	- 'Ataliagei	Michael Gonzalcz
71.112.10	<del></del>	9248 Collins Ave. #204
		Surfside, FL 33154
		<u> </u>
<del></del>		
<del></del>		
/Ilce offe		
IICLE V: I	late is listed, the date must	e date of filing: (OPTIONAL) be specific and cannot be more than five business days p
TICLE V: In effective or 90 days after the date in ment's effective	Effective date, if other than the late is listed, the date must ter the date of filing.) serted in this block does not meet a date on the Department of State	be specific and cannot be more than five business days p the applicable statutory filing requirements, this date will not be listed a
FICLE V: In effective or 90 days aft: If the date in ment's effective	Effective date, if other than the late is listed, the date must ter the date of filing.) serted in this block does not meet	be specific and cannot be more than five business days p the applicable statutory filing requirements, this date will not be listed a
TICLE V: In an effective of r 90 days after the date in the ment's effective times.	Effective date, if other than the late is listed, the date must ter the date of filing.) serted in this block does not meet a date on the Department of State	be specific and cannot be more than five business days p the applicable statutory filing requirements, this date will not be listed a
TICLE V: In effective or 90 days after the date in ment's effective of the title of	Effective date, if other than the late is listed, the date must ter the date of filing.) screed in this block does not meet to date on the Department of State Other provisions, if any.  RED SIGNATURE:  Signature of a member This document is executed in a lam aware that any false inform	be specific and cannot be more than five business days p the applicable statutory filing requirements, this date will not be listed a
TICLE V: In an effective of r 90 days after the date in the ment's effective times.	Effective date, if other than the late is listed, the date must ter the date of filing.) screed in this block does not meet to date on the Department of State Other provisions, if any.  RED SIGNATURE:  Signature of a member This document is executed in a lam aware that any false inform	the applicable statutory filing requirements, this date will not be listed a 's records.  er or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State
TICLE V: Ean effective or 90 days after 15 the date in ament's effective TICLE VI: 6	Effective date, if other than the late is listed, the date must let the date of filing.) serted in this block does not meet to date on the Department of State. Other provisions, if any.  RED SIGNATURE:  Signature of a member This document is executed in a lam aware that any false informationstitutes a third degree felony. Michael Gonzalez	the applicable statutory filing requirements, this date will not be listed a 's records.  er or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State
TICLE V: Ean effective or 90 days after 15 the date in ument's effective. TICLE VI: 6	Effective date, if other than the late is listed, the date must der the date of filing.) screed in this block does not meet to date on the Department of State.  Other provisions, if any.  RED SIGNATURE:  Signature of a member This document is executed in a lam aware that any false informationstitutes a third degree felony.  Michael Gonzalez	the applicable statutory filing requirements, this date will not be listed a 's records.  er or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State y as provided for in s.817.155, F.S.
an effective or 90 days after 15 the date in ument's effective of TICLE VI: 0	Effective date, if other than the late is listed, the date must der the date of filing.) serted in this block does not meet to date on the Department of State Other provisions, if any.  RED SIGNATURE:  Signature of a member This document is executed in a lam aware that any false informationstitutes a third degree felony Michael Gonzalez  Ty  Of Filing Fee for Articles of	the applicable statutory filing requirements, this date will not be listed a 's records.  Per or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. nation submitted in a document to the Department of State y as provided for in s.817.155, F.S.  Peed or printed name of signee  Filing Fees of Organization and Designation of Registered Agent
an effective or 90 days after 15 the date in ument's effective of TICLE VI: 0	Effective date, if other than the late is listed, the date must der the date of filing.) screed in this block does not meet to date on the Department of State.  Other provisions, if any.  RED SIGNATURE:  Signature of a member This document is executed in a lam aware that any false informationstitutes a third degree felony.  Michael Gonzalez	the applicable statutory filing requirements, this date will not be listed a 's records.  Per or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. nation submitted in a document to the Department of State y as provided for in s.817.155, F.S.  Peed or printed name of signee  Filing Fees of Organization and Designation of Registered Agent

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

ARTICLE IV-