

(Re	questor's Name)	
(Add	dress)	
(Ade	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Ru	siness Entity Nan	ma)
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETAL OF STATE

### **COVER LETTER**

	ion Section of Corporations		
SUBJECT: Bras	scar Auto Sales & Rentals, Inc		
		of Resulting Florida Limit	ed Company)
			nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all	correspondence concerni	ng this matter to:	
Claudia E Reyes			
	(Contact Person)		
CBS Financial CPA	. PA		
	(Firm/Company)		
6075 W Commercia	al Blvd	<u>.</u>	
	(Address)		
Tamarac, FL 33319			
	(City, State and Zip Code)		
claudia@cbsfinanci	alcpa.com		
E-mail Address:	(to be used for future annual re	eport notifications)	
For further infor	mation concerning this ma	atter, please call:	
Claudia	•	21, 954 724-4	4141
(Name of 0	Contact Person)	(Area Code) (Day	viime Telephone Number)
Enclosed is a che	eck for the following amou		
\$150.00 Filing F (\$25 for Conversion & \$125 for Articles of Organization)		☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDI		MAILING A	
Registration Section		Registration Section Division of Corporations	
Division of Corp Clifton Building	orations	P. O. Box 63	•
2661 Executive (	Center Circle	Tallahassee,	

Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 21, 2015

CLAUDIA E REYES 6075 W COMMERCIAL BLVD TAMARAC, FL 33319

SUBJECT: BRASCAR AUTO SALES & RENTALS, INC

Ref. Number: W15000081555

We have received your document for BRASCAR AUTO SALES & RENTALS, INC and your check(s) totaling \$150.00. 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 Incorporation, 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) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 715A00026645

### **Articles of Conversion**

For

## "Other Business Entity"

Into

# Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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 Busing Brascar Auto Sales & Rentals, Inc	ess Entity" immediately prior to the filing of the Articles of Conversion is:
	nter Name of Other Business Entity)
2. The "Other Business Entity" is	Corporation .
-	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorpo	orated under the laws of Florida
	(Listor chotal or it a soul L. S. antity, the name of the country)
on February 16, 1999 (date of organization, formation or i	ncorporation)
3. The name of the Florida Limit	ed Liability Company as set forth in the attached Articles of Organization:
Brascar Auto Sales & Rental, LLC	
(Enter Nam	ne of Florida Limited Liability Company)
4. If not effective on the date of f	iling, enter the effective date:
· ·	e prior to date of receipt or filed date nor more than 90 days after the
date listed in the attached Artic	the Florida Department of State; <u>AND</u> 2) must be the same as the effective less of Organization, if an effective date is listed therein.)  oes not meet the applicable statutory filing requirements, this date will not be listed as the ment of State's records.
5. The plan of conversion has bee	n approved in accordance with all applicable statutes

Page 1 of 2



Signed this day of December	20_/5
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:  Printed Name: Stephan G Kuljis	A THE STATE OF THE
Printed Name: Stephan C Kuths	Title: Mgi
Signature(s) on behalf of Other Business Entity;	See below for required signature(s)
Signature:	
Printed Name: Stephan G Kuljis	Title: Mgr.
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	
Signature:	Tialo
Printed Name:	Title:
Signature:	
Printed Name:	
Git	
Signature:Printed Name:	Title
Timed Name.	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Brascar Auto Sales & Rental, LLC	
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4821 North Federal Highway	4821 North Federal Highway
Pompano Beach, FL 33064	Pompano Beach, FL 33064
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)  The name and the Florida street address of the re	red Agent. You must designate an individual or another
Stephan G Kuljis	
Name	
4521 North Federal Highway	
Florida street address (P.O.	Box NOT acceptable)
Pompano Beach	FL 33064
City	Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S

(CONTINUED)

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<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
AMBR	Stephan J Kuljis		
	4521 North Federal Highway		
	Pompano Beach, FL 33064		
an effective date is listed, the date mu- or 90 days after the date of filing.)	the date of filing: (OPTIONAL)  st be specific and cannot be more than five business days prior  et the applicable statutory filing requirements, this date will not be listed as the te's records.		
	, 1		
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE:  Signature of a member	per or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. rmation submitted in a document to the Department of State ny as provided for in s.817.155, F.S.		

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)

Typed or printed name of signee

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