L1600000 3969

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Mr. Radriguezer
AUTHOHIZATION BY PHONE TO
COHRECT
DATE 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
DOC. EXAM

Office Use Only



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12/30/15--01017--016 **150.00





COVER LETTER

Division of C	orporations			
SUBJECT: SOUTH I	FLORIDA SEAMLESS G	UTTERS LLC		
SOBJECT.		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:		
JHON RODRIGUEZ				
	(Contact Person)		•	
JIREH MULTISERVICI	ES LLC			
	(Firm/Company)		•	
3095 S MILITARY TRA	AIL#4			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Address)		•	
LAKE WORTH FL 3346	53			
	City, State and Zip Code)			
jhonrealtor@hotmail.com	n			
E-mail Address: (to b	e used for future annual re	port notifications)	•	
For further information	on concerning this ma	tter, please call:		
JHON RODRIGUEZ		_at (<u>561</u>	574 9	
(Name of Conta	et Person)	(Area Code)	(Day	rtime Telephone Number)
Enclosed is a check f	or 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 and Certified Cop		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAIL	NG A	ADDRESS:
Registration Section		Registration Section		
Division of Corporations		Division of Corporations P. O. Box 6327		
Clifton Building 2661 Executive Center Circle		Tallahassee, FL 32314		
Tallahassee, FL 3230		Turiditu		

Registration Section

APPROVEL AND FILED

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED

15 DEC 30 PM 3: 50

SECRETARY OF STATE

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: SOUTH FLORIDA SEAMLESS GUTTERS INC $P/U-90943$
(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
11/06/2014 (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: SOUTH FLORIDA SEAMLESS GUTTERS LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 12/31/2015 (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

			1.154	
Signed this 28	day of DECEMBER	20_15		HUVLL ND
				ILED
Signature of A	uthorized Representative of Limi	ted Liability Company:	15 DEA A	
Signature of Ai	uthorized Representative:		15 DEC 31	D PM 3:56
Printed Name: <u>F</u>	REDY RAMIREZ	Title: AMBR	SECRETAR	8' OF STATE
	1 /		ALLAHAS	EE FLORIDA
<u>Signature(s) on</u>	behalf of Other Business Entity:	See below for required signa	ature(s)	
Signature: Signature: Printed Name:	1/5			
Printed Name:	REDY RAMIREZ	Title: PRESIDENT		
Signature: Printed Name:		Title		
rimed Name		I itic		
Signature:				
Printed Name:_		Title:		
Signature:				
Printed Name:_		Title:		
Signature: Printed Name:		Title		
r rinicu Name		THIC		
Signature:				
Printed Name:_		Title:		
If Florida Corp	oration:			
	airman, Vice Chairman, Director, or	Officer.		
If Directors or C	Officers have not been selected, an In-	corporator must sign.		
If Florida Can	eral Partnership or Limited Liabili	ty Partnerchin:		
	e General Partner.	ty t artifership.		
-				
	ited Partnership or Limited Liabili LL General Partners.	ty Limited Partnership:		
Signatures of A	LL General Farmers.			
All others:				
Signature of an	authorized person.			
Fees:				
Articles	of Conversion:	\$25.00		
	Florida Articles of Organization:	\$125.00		
	d Copy:	\$30.00 (Optional)		
Certifica	ate of Status:	\$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

COLUMN CONTRACTOR OF A MARCON CONTRACTOR OF A	
SOUTH FLORIDA SEAMLESS GUTTERS L (Must end with the words "Lim	L.C. led Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2328 FAIRWAY DR	2328 FAIRWAY DR
(The Limited Liability Company cannot serve as its of	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Re	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address JIREH MULTISERVIC	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address JIREH MULTISERVIC	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are: ES LLC Name #4 gg (R.O. Poy NOT geographia)
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address JIREH MULTISERVIC	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are: ES LLC Name #4

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

Company:	
Title:	Name and Address:
"AMBR" = Authorized Mem "MGR" = Manager	<u> </u>
AMBR	2328 FAIRWAY DR Fredy Ramirez
	WEST PALM BEACH FL 33409
	7 <u>5</u> 05 05 05 05 05 05 05 05 05 05 05 05 05
	30 FILE
	— <u> </u>
	£m ⋅ ⊙
(Use attachment if necessary)
ADTICLE V. Effective data if other	r than the date of filing: 12/31/2015 . (OPTIONAL)
(If an effective date is listed, the da	te must be specific and cannot be more than five business days prior
to or 90 days after the date of filing.) not meet the applicable statutory filing requirements, this date will not be listed as th
document's effective date on the Departmen	it of State's records.
ARTICLE VI: Other provisions, if a	ny.
DECLUDED CICNATURE	9
REQUIRED SIGNATURE	:
This document is exe	member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any fa constitutes a third deg	alse information submitted in a document to the Department of State tree felony as provided for in s.817.155, F.S.
FREDY RAMIR	
	Typed or printed name of signee

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

ARTICLE IV-

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)
Page 2 of 2

Filing Fees