

L16 0000009689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

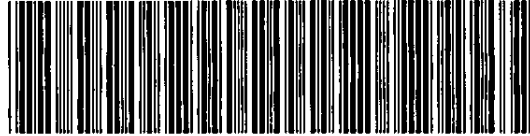
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

See 900290320029
for replacement money.

wrong form

Office Use Only



300278509473

11/30/15--01019--024 **125.00

10/30/15--01017--018 **25.00

FILED
16 JAN 19 AM 10:35
SECRET
TALLAHASSEE, FL 32301

JAN 20 2016

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Guerra Insurance, 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:

Gabriel Guerra
(Contact Person)

Guerra Insurance, Inc.
(Firm/Company)

10205 SW 135 ST
(Address)

Miami, FL 33176
(City, State and Zip Code)

GGuerra1997@gmail.com
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Gabriel Guerra at (305) 746-3267
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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 ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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16 JAN 19 AM 10:35
TALLAHASSEE, FL
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 NOV 25 PM 12:56

November 5, 2015

GABRIEL GUERRA
GUERRA INSURANCE, INC.
10205 SW 135 ST
MIAMI, FL 33176

SUBJECT: GUERRA INSURANCE, INC.
Ref. Number: P09000035756

We have received your document for GUERRA INSURANCE, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Corporation. Please complete and return the enclosed blank form(s).

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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 915A00023461

I would like to convert this corporation into a LLC
named Nitro Capital LLC. Please see the necessary
documents to make the change. Please ~~return~~ ^{use} my
original \$25 check as a credit.

Thank You,

Gabriel Guerra

Nitro decided not to file conversion wants just the
LLC filed now.

dcc

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Nitro Capital 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:

8500 SW 8 ST
Suite 228
Miami, FL 33144

Mailing Address:

PO Box 562231
Miami, FL 33256

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.)

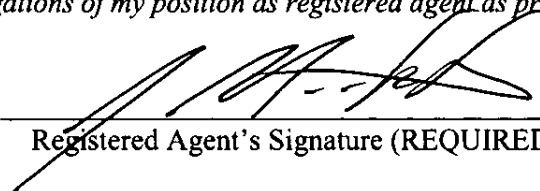
The name and the Florida street address of the registered agent are:

Machado, Jose Luis Esq
Name

8500 SW 8 ST Suite 238
Florida street address (P.O. Box **NOT** acceptable)

Miami FL 33144
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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Gabriel Guerra

8500 SW 8 ST Suite 228
Miami, FL 33144

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Gabriel Guerra

Typed or printed name of signee

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)

Page 2 of 2

~~\$25 credit~~

\$125.00

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TALLAHASSEE
FLORIDA