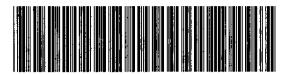
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| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | Idress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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16 FEB 26 PH 4: 50
SECRETARY OF STATE

0.3-07-7

COVER LETTER

| TO: | Registration S Division of C | | | | | |
|--------------------------|--|--|-------------------------------------|----------------------------|--|------|
| SUBJ | JECT: GREAT | N EZ, LLC | | | | |
| | | (Name | of Resulting Florida | Limite | ed Company) | |
| | | the state of the s | • | | nd fees are submitted to convert an "Cocordance with s. 605.1045, F.S. | ther |
| Please | e return all corre | espondence concerning | g this matter to: | | | |
| LUIS | F MORA | _ | | | | |
| | | (Contact Person) | | | | |
| GREA | AT 'N EZ, LLC | | | | | |
| | | (Firm/Company) | | | | |
| 12204 | TRITON LN | | | | | |
| | | (Address) | | | | |
| ORLA | NDO, FL 32837 | | | | | |
| | ((| City, State and Zip Code) | | | | |
| LUISI | FELIPEMORA1@ | GMAIL.COM | | | | |
| E-1 | nail Address: (to b | e used for future annual re | port notifications) | | | |
| For fi | irther information | on concerning this ma | tter, please call: | | , | |
| LUIS | F MORA | | _at (| 556-5 | 5507 | |
| | (Name of Conta | ct Person) | (Area Code) | (Day | ytime Telephone Number) | |
| Enclo | sed is a check f | or the following amou | ınt: | | | |
| (\$25 fc & \$12 | 50.00 Filing Fees or Conversion 5 for Articles anization) | \$155.00 Filing Fees and Certificate of Status | □\$180.00 Filing and Certified Copy | | ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status | |
| Regis Divis Clifto | EET ADDRESS tration Section ion of Corporation Building Executive Cent | ions | Registra Division P. O. Bo | ition (n of C ox 63 | Corporations | |

Tallahassee, FL 32301

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.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles GREAT 'N EZ, INC | of Conv | /ersic | on is: |
|--|-----------------|--------|-------------|
| (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.) | TALLAH | 16 FEB | 77 |
| First organized, formed or incorporated under the laws of | <u> </u> | EB 26 | Crepanition |
| on $\frac{02/12/2016}{\text{(date of organization, formation or incorporation)}}$ (Enter state, or if a non-U.S. entity, the na | LOR | | D D |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Article GREAT 'N EZ, LLC | s of Or | gani | zation: |
| (Enter Name of Florida Limited Liability Company) | | | |
| 4. If not effective on the date of filing, enter the effective date: 03/01/2016 (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 9 date this document is filed by the Florida Department of State; AND 2) must be the sa 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 we document's effective date on the Department of State's records. | ame as 1 n.) | the e | ffective |

Page 1 of 2

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

| Signed this | day of FEBRUARY | 20_16 | |
|----------------------------|--|--|-----------------|
| <u>Signature</u> | of Authorized Representative of Lin | mited Liability Company: | |
| Signature of Printed Nar | of Authorized Representative: ne: LUIS F MORA | Title: PRESIDENT | _ |
| | | [See below for required signature(s)] | |
| Signature: | | | |
| Printed Nar | ne: LUIS F MORA | Title: PRESIDENT | - |
| Signature: | | | |
| Printed Nar | ne: | Title: | _ _ |
| Signature: | | | |
| Printed Nar | ne: | Title: | |
| | | | <u>-</u> -1 |
| Printed Nar | ne: | Title: | - CE 60 |
| | | | |
| Signature: | | Title: | - SS 2 |
| Printed Nar | ne: | I itle: | - 00 æ in |
| Signature: | | | |
| Printed Nar | ne: | Title: | ORAGA SORAGA |
| Signature o | Corporation: f Chairman, Vice Chairman, Director, o or Officers have not been selected, an l | | - |
| | General Partnership or Limited Liab | ility Partnership: | |
| Signature o | f one General Partner. | | |
| | Limited Partnership or Limited Liabi of ALL General Partners. | ility Limited Partnership: | |
| Signatures (| ALL General Partners. | | |
| All others: Signature o | f an authorized person. | | |
| Fees: | | | |
| Fee Cer | icles of Conversion: s for Florida Articles of Organization: tified Copy: tificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) | |

. ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| GREAT 'N EZ, LLC | |
|--|--|
| (Must end with the words "Li | mited Liability Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: | |
| The mailing address and street address | s of the principal office of the Limited Liability Company is |
| Principal Office Address: | Mailing Address: |
| 12204 TRITON LN | 12204 TRITON LN |
| ORLANDO, FL 32837 | ORLANDO, FL 32837 |
| | |
| ARTICLE III - Registered Agent, R | agistared Office & Degistered Agent's Signature |
| | |
| | s own Registered Agent. You must designate an individual or another |
| (The Limited Liability Company cannot serve as its | s own Registered Agent. You must designate an individual or another) |
| (The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street addresses the company cannot serve as it business entity with an active Florida registration. | s own Registered Agent. You must designate an individual or another) ss of the registered agent are: |
| (The Limited Liability Company cannot serve as it business entity with an active Florida registration. | s own Registered Agent. You must designate an individual or another) ss of the registered agent are: Name Name |
| (The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street address LUIS F MORA | s own Registered Agent. You must designate an individual or another See of the registered agent are: Name Name |
| (The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street address LUIS F MORA 12204 TRITON LN | s own Registered Agent. You must designate an individual or another See of the registered agent are: Name Name |
| (The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street address LUIS F MORA 12204 TRITON LN | s own Registered Agent. You must designate an individual or another Set of the registered agent are: Name Name |
| The name and the Florida street address LUIS F MORA 12204 TRITON LN Florida street add Florida street add Florida street address | s own Registered Agent. You must designate an individual or another ss of the registered agent are: Name ress (P.O. Box NOT acceptable) FL 32837 |
| The name and the Florida street address LUIS F MORA 12204 TRITON LN Florida street add ORLANDO City | Name Tess (P.O. Box NOT acceptable) FL 32837 Zip |
| The name and the Florida street address LUIS F MORA 12204 TRITON LN Florida street add ORLANDO City Having been named as registered age | s own Registered Agent. You must designate an individual or another ss of the registered agent are: Name ress (P.O. Box NOT acceptable) FL 32837 |
| The name and the Florida street address LUIS F MORA 12204 TRITON LN Florida street add ORLANDO City Having been named as registered aga liability company at the place des registered agent and agree to act in the street and agree to act in the street as the street agent. | sown Registered Agent. You must designate an individual or another ss of the registered agent are: Name ress (P.O. Box NOT acceptable) FL 32837 Zip rent and to accept service of process for the above stated limit |

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

| Company: | | | | |
|---|--|--|--|--|
| <u>Title:</u> | Name and Address: | | | |
| "AMBR" = Authorized Membe | r | | | |
| "MGR" = Manager AMBR | LUIS F MORA | | | |
| | 12204 TRITON LN | | | |
| | ORLANDO, FL 32837 | | | |
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| | <u> </u> | | | |
| (If an effective date is listed, the date it to or 90 days after the date of filing.) | nan the date of filing: 03/01/2016 . (OPTIONAL) must be specific and cannot be more than five business days pri meet the applicable statutory filing requirements, this date will not be listed as f State's records. | | | |
| ARTICLE VI: Other provisions, if any. | | | | |
| REQUIRED SIGNATURE: | | | | |
| This document is execute I am aware that any false | ember or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S. | | | |
| LUIS F MORA | | | | |
| | Typed or printed name of signee | | | |
| | Filing Fees | | | |

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

ARTICLE IV-

Page 2 of 2

\$ 30.00 Certified Copy (Optional)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 5.00 Certificate of Status (Optional)