L/60000 52394

(Re	equestor's Name)	
(Ac	dress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
phr		

Office Use Only

W16-14882



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02/19/16--01015--028 **150.00

16 HAR 10 PH 3: 21

MAR 14 2016 S. GILBERT

COVÈR LETTER

TO:	Registration S Division of C			
SUBJ	ECT: IMMIGR.	ATION ONE LLC		•
		(Name	of Resulting Florida Limit	ed Company)
The en	nclosed Articles ess Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organization, a ability Company" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	return all corre	espondence concernin	g this matter to:	
GERAI	RDO MORAN			
		(Contact Person)		
IMMIG	RATION ONE L	LC		
		(Firm/Company)		
301 N I	FERN CREEK AV	V		
		(Address)		
ORLA?	NDO FL 32803			
	(0	City, State and Zip Code)		
gmoran	@bellsouth.net			
E-m	ail Address: (to b	e used for future annual re	port notifications)	
For fu	rther information	on concerning this ma	tter, please call:	
GERAF	RDO MORAN		_at (407) ⁹²⁴ -	2136
	(Name of Conta	ct Person)		ytime Telephone Number)
Enclos	sed is a check f	or the following amou	nt:	
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	☐\$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
STRE	ET ADDRESS	S:	MAILING.	ADDRESS:
	ration Section		Registration	
	on of Corporati 1 Building	ons		Corporations
	i Building Executive Cent	er Circle	P. O. Box 63 Tallahassee,	
				··

INHS11 (06/15)

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 29, 2016

GERARDO MORAN 301 N FERN CREEK AVE ORLANDO, FL 32803

SUBJECT: IMMIGRATION ONE LLC

Ref. Number: W16000014882

We have received your document for IMMIGRATION ONE LLC 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 names listed on your conversion must be the same as listed on your Articles of Organization.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return the corrected original and one copy of 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.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 716A00004182

16 MAR 10 AM II: 20

Articles of Conversion For "Other Business Entity"

The second secon 16 MAR 10 PM 3:21

Into
Florida Limited Liability Company Ali AMASSEE, FLORIUA

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.

	(Enter Name of Other Business Entity)	
2. The "Other Business Entity"	CORPORATION is a	
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or inco	rporated under the laws of	
MARCH 19, 2014	(Enter state, or if a non-U.S. entity, the name of the country)	
(date of organization, formation of	r incorporation)	
3. The name of the Florida Lin	nited Liability Company as set forth in the attached Articles of Organization	1:
IMMIGRATION ONE LLC		
	ame of Florida Limited Liability Company)	
(Enter N		
4. If not effective on the date of (The effective date: 1) cannot date this document is filed by date listed in the attached Art	f filing, enter the effective date: MARCH 19, 2014 be prior to date of receipt or filed date nor more than 90 days after the the Florida Department of State; AND 2) must be the same as the effecticles of Organization, if an effective date is listed therein.) k does not meet the applicable statutory filing requirements, this date will not be listed as the	

Page 1 of 2

•	•
Signed this 12 day of FEBRUARY	· 20 <u>·16·</u>
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:	
Printed Name: 6ERALDO HORAN	Title: MGRM
Trinted Hame.	- 13 L/-
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: GERARDO MORAN	Title: MGRM
•	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	<u> </u>
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In-	
and the second of the second o	vorporator miast sign.
If Florida General Partnership or Limited Liabili	tv Partnershin:
Signature of one General Partner.	cy I arener surp.
organisary or one centeral randor.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership
Signatures of ALL General Partners.	ty Emilieu i ai mei siip.
bigilatares of ALDE Concrair Farancis.	
All others:	
Signature of an authorized person.	
organizate of an audiorized 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

IMMIGRATION ONE LLC			
	ds "Limited Liabil	ty Company, "L.L.C.," or "LLC.")	
ABTICLE II A 33			
ARTICLE II - Address: The mailing address and street address	dress of the ni	incinal office of the Limite	d Liability Company
The maning address and shoot ad-	areas or the pr	meipar office of the Limite	d Liability Compan
Principal Office Address:		Mailing Address:	
301 N FERN CREEK AV		301 N FERN CREEK AV	
ORLANDO FL 32803		ORLANDO FL 32803	
The name and the Florida street as GERARDO MO			6 E
	Name		
201 M CEDNI CD	EEV AM		
301 N FERN CR		Roy NOT accentable)	
		. Box NOT acceptable)	16 MAR TO PH O
	t address (P.O	FL 32803	
Florida street		<u> </u>	
Florida street ORLANDO Having been named as registere liability company at the place registered agent and agree to acceptatives relating to the proper of	c address (P.O City ed agent and to designated in this capacand complete p	FL 32803 Zip accept service of process for this certificate, I hereby accept. I further agree to complete formance of my duties, and	or the above stated li cept the appointment by with the provisions nd I am familiar with
Florida street ORLANDO Having been named as registere liability company at the place registered agent and agree to ac	c address (P.O City ed agent and to designated in this capacand complete p	FL 32803 Zip accept service of process for this certificate, I hereby accept. I further agree to complete formance of my duties, and	or the above stated lecept the appointmently with the provisionant I am familiar with

Page 1 of 2

(CONTINUED)

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	GER ARRO MORAN
AMBR	GERARDO MORAN 301 N FERN CREEK AV
	ORLANDO FL 32803
	Ortal Rep of E Saloty
LE V: Effective date, if other than	n the date of filing: 02/12/2016
LE V: Effective date, if other than fective date is listed, the date m days after the date of filing.) the date inserted in this block does not n's effective date on the Department of S LE VI: Other provisions, if any.	nust be specific and cannot be more than five business deneet the applicable statutory filing requirements, this date will not be latter's records.
ffective date is listed, the date m days after the date of filing.)	nust be specific and cannot be more than five business deneet the applicable statutory filing requirements, this date will not be latter's records.
LE V: Effective date, if other than fective date is listed, the date m days after the date of filing.) he date inserted in this block does not not seffective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mere This document is executed I am aware that any false in	neet the applicable statutory filing requirements, this date will not be later's records.
LE V: Effective date, if other than fective date is listed, the date m days after the date of filing.) he date inserted in this block does not n's effective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mere This document is executed I am aware that any false in constitutes a third degree fee	neet the applicable statutory filing requirements, this date will not be late's records. The applicable statutory filing requirements, this date will not be late's records. The applicable statutory filing requirements, this date will not be late's records. The applicable statutory filing requirements, this date will not be later's records.

Page 2 of 2