L16000123615

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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Cooking National)
Certified Copies Certificates of Status
Special Instructions to Fili- Officer:
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Office Use Only



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SEGNETARY OF STATE
AFLAHASSEE FLORIDA

COVER LETTER

Division of Corporations
SUBJECT: P & N AMIGAS RESTAURANT LLC
(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:
PILAR ANGLERO
(Contact Person)
P & N AMIGAS RESTAURANT
(Firm/Company)
10824 E US HWY 92
(Address)
TAMPA FLORIDA 33610
(City, State and Zip Code)
guayo.canas@gmail.com
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
EDUARDO A CAÑASat (_813
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & Status \$125 for Articles of Organization) \$150.00 Filing Fees and Certificate of Status \$180.00 Filing Fees and Certified Copy & 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

INHS11 (06/15)



May 10, 2016

PILAR ANGLERO 10824 E US HWY 92 TAMPA, FL 33610

SUBJECT: P & N AMIGAS RESTAURANT LLC

Ref. Number: W16000034059

We have received your document for P & N AMIGAS RESTAURANT 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):

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.

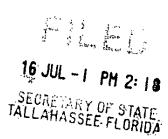
Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

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.

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.

(E	nter Name of Other Business Entity)
2. The "Other Business Entity" is	CORPORATION
2	(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
12/03/2015	(Enter state, or if a non-U.S. entity, the name of the country)
on (date of organization, formation or in	ncorporation)
3. The name of the Florida Limite	ed Liability Company as set forth in the attached Articles of Organization:
P&N AMIGAS RESTAURANT LLC	
(Enter Nam	e of Florida Limited Liability Company)
4. If not effective on the date of f	ling, enter the effective date:
(The effective date: 1) cannot be date this document is filed by the date listed in the attached Articles.	FEBRUARY 8, 2016 e prior to date of receipt or filed date nor more than 90 days after the e Florida Department of State; AND 2) must be the same as the effective les 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.

Page 1 of 2

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Signed this 10t	h day of JUNE	_ 20_16
	Authorized Representative of Limi	
Signature of A	uthorized Representative:	las am G Goo
Printed Name: I	PILAR ANGLERO	Title: MGR
Signature(s) or	behalf of Other Business Entity:	See below for required signature(s)]
Signature: 4	Dilas and Cero	Title: PRESIDENT
Printed Name: I	PILAR ANGLERO	Title: PRESIDENT
Signature:		
Printed Name:_		Title:
Signature:		Title:
Printed Name:_		Title:
Signature:		Title:
Printed Name:_		Title:
Signature:		Title:
Printed Name:_		Title:
Signature:		Title:
Printed Name:_		Title:
If Florida Cor		000
	nairman, Vice Chairman, Director, or Officers have not been selected, an Inc	
		•
	<u>eral Partnership or Limited Liabili</u> e General Partner.	ty Partnersnip:
	<u>ited Partnership or Limited Liabili</u> LL General Partners.	ty Limited Partnership:
All others: Signature of an	authorized person.	
Fees:		
	s of Conversion:	\$25.00
	r Florida Articles of Organization:	\$125.00 \$30.00 (Optional)
	ed Copy: cate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

P&N AMIGAS RESTA		ability Company, "L.L.C.," or "LLC.")	
(IVIUS	stend with the words. Limited Li	ability Company, E.E.C., or EEC.)	
ARTICLE II - Ado			
The mailing address	s and street address of the	principal office of the Limited Liabil	ity Company
Principal Office A	ddress:	Mailing Address:	
10824 E US HWY 92		10824 E US HWY 92	
(The Limited Liability Cor	mpany cannot serve as its own R	red Office, & Registered Agent's Signistered Agent. You must designate an individual	ar another
ARTICLE III - Re (The Limited Liability Col business entity with an ac	impany cannot serve as its own Roctive Florida registration.) Florida street address of the	red Office, & Registered Agent's Signistered Agent. You must designate an individual	PRINCE - I
ARTICLE III - Re (The Limited Liability Col business entity with an ac	impany cannot serve as its own Roctive Florida registration.) Florida street address of the EDUARDO A CANAS	red Office, & Registered Agent's Signistered Agent's Signistered Agent. You must designate an individual are registered agent are:	Pranother 1
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ARTICLE III - Re (The Limited Liability Col business entity with an ac	mpany cannot serve as its own Rective Florida registration.) Florida street address of the EDUARDO A CANAS No. 2819 N FLORIDA AVE	red Office, & Registered Agent's Signistered Agent's Signistered Agent. You must designate an individual are registered agent are:	ARY OF STA
ARTICLE III - Re (The Limited Liability Corbusiness entity with an act) The name and the F	mpany cannot serve as its own Rective Florida registration.) Florida street address of the EDUARDO A CANAS No. 2819 N FLORIDA AVE	red Office, & Registered Agent's Signistered Agent's Signistered Agent. You must designate an individual ne registered agent are:	ARY OF STA

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)

Page 1 of 2

	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
	"MGR" = Manager	•	
	MGR — Manager MGR	PILAR ANGLERO	
	···or	2029 DARLINGTON OAKS DRIVE	
		VALRICO FL, 33594	
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fan	CLE V: Effective date, if other tha effective date is listed, the date n	on the date of filing: FEBRUARY 8, 2016 . (OPTION nust be specific and cannot be more than five business	NAL) s days _l
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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

Typed or printed name of signee Filing Fees

PILAR ANGLERO