# L10000124562

(Re	questor's Name)	
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	)
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





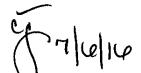
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# **COVER LETTER**

TO: Registration Division of C					
CECHHI	EAL, INC			·	
SUBJECT:	(Name	of Resulting Florida	Limite	d Company)	<del>-</del>
				d fees are submitted to eccordance with s. 605.1	
Please return all corr	espondence concernin	g this matter to:			
CARLOS GIĻ					
,	(Contact Person)	***************************************			
3910 WEST FLAGLER	(Firm/Company) STREET				
	(Address)				
MIAMI, FLORIDA					
carlos@carlosagilpa.con	City, State and Zip Code)				
E-mail Address: (to b	e used for future annual re	port notifications)			
For further informati	on concerning this ma	tter, please call:			
carlos gil		305 at (	443-2	2525	
(Name of Conta	act Person)	_ \	(Day	time Telephone Number)	-
Enclosed is a check t	for 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 I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES Registration Section Division of Corporat		Registra	ition S	ADDRESS: Section Corporations	16 J

P. O. Box 6327

Tallahassee, FL 32314

JUN 28 PM

INHS11 (06/15)

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

#### **Articles of Conversion**

For

## "Other Business Entity"

Into

### Florida Limited Liability Company

FILED

16 JUN 28 FH 3. 22

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.

(E	nter Name of Other Business Entity) P15000 52597	
2. The "Other Business Entity" is	CORPORATION	
	CORPORATION  a  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorpo	FLORIDA prated under the laws of	
06/15/2015	(Enter state, or if a non-U.S. entity, the name of the country)	
(date of organization, formation or i	ncorporation)	
3. The name of the Florida Limit	ed Liability Company as set forth in the attached Articles of Organization	l:
CEGUHEAL, LLC		
	•	
(Enter Nam	e of Florida Limited Liability Company)	
	06/21/2016	
4. If not effective on the date of f (The effective date: 1) cannot b date this document is filed by the date listed in the attached Articles.	iling, enter the effective date:  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 es 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	⁄e

Page 1 of 2

Signed this 21	day of JUNE	20_16
Signature of Autho	orized Representative	of Limited Liability Company:
Signature of Author Printed Name: CARL	rized Representative: .OS ALONSO, MANAGER	OF SICA. Title: MANAGER
Signature(s) on beh	alf of Other Business F	Entity: [See below for required signature(s)]
Signature: Printed Name: CARI	OS ALONSO, MANAGER	OF SICA Title: PRESIDENT
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Printed Name:		Title:
C'		
Signature: Printed Name:		Title:
-		
		T'.1
Printed Name:		Title:
If Florida Corporat	<u>tion:</u>	
	an, Vice Chairman, Dire	
If Directors or Office	ers have not been selecte	d, an Incorporator must sign.
If Florida General l	Partnership or Limited	Liability Partnership:
Signature of one Ger		The state of the s
If Florido I imitad l	Doutususkin su I iwited	Liability Limited Dantmanships
Signatures of <u>ALL</u> (		Liability Limited Partnership:
All others: Signature of an autho	orized person.	
Fees:		
Articles of C	Conversion:	\$25.00

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:

Page 2 of 2

\$125.00

\$30.00 (Optional) \$5.00 (Optional) 16 型 28 平 3

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	FILED
The name of the Limited Liability Company is:	16 JUN 28 FN 3.22
CEGUHEAL, LLC	ly Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ANTICLE II - Address:	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5252 NW 85 AVENUE	SAME AS PRINCIPAL
UNIT 1702	
DORAL FLORIDA 33166	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registered address of the registered address.	ered Agent. You must designate an individual or another
CARLOS A GIL, PA	
Name	
3910 WEST FLAGLER STREET	
Florida street address (P.O.	Box NOT acceptable)
MIAMI	FL <sup>33134</sup>
City	Zip
liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and intered agent as provided for in Chapter 605, F.S
(CONTINU	U <b>ED</b> )

Page 1 of 2

The name and address of each persor Company:	authorized to manage and con	trol the Limited Liability
Company.		FILED
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	16 JUN 28 PK 3-22
"MGR" = Manager MGRM	SICA, LLC 5252 NW 85 AVENUE UNIT DORAL, FLORIDA 33166	3500 1500 F 1500 1500 1500 1500 1500 1500
(Use attachment if necessary)	•	
ARTICLE V: Effective date, if other than the lift an effective date is listed, the date must o or 90 days after the date of filing.)  Note: If the date inserted in this block does not meet to locument's effective date on the Department of State's	be specific and cannot be most the applicable statutory filing require	re than five business days pric
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:		
	,	
Signature of a membe	r or an authorized representa	ative of a member.
This document is executed in a	ccordance with section 605.0203 (1) (nation submitted in a document to the provided for in s.817.155, F.S.	(b), Florida Statutes.
This document is executed in a lam aware that any false inform constitutes a third degree felority CARLOS ALONSO, MAI	nation submitted in a document to the	(b), Florida Statutes.  Department of State

\$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