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☐ PICK-UP	☐ WAIT	MAIL
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(Bu	ısiness Entity Nan	ne)
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer	
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Office Use Only

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COVER LETTER

	Registration S Division of C			
SUBJE	CCT:	Coener,	22C of Resulting Florida Limite	d Company)
		(Name	of Kesulding Florida Lilline	u Company)
The end Busines	closed Articles ss Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organization, an ability Company" in a	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this matter to:	
Le	ロヘカレム	6 FierA	,	
		(Contact Person)		
2	ECOLA	er, LLC		
		(Firm/Company)		
186	66 St	of Tastle L	_al	
		(Address)		
	CA K	ATON, FL	33498	
	(0	City, State and Zip Code)		
LR	PCA (DE	erenewable.	Com	
E-ma	il Address: (to be	e used for future annual rep	port notifications)	
For furt	ther information	on concerning this mat	tter, please call:	
Lei	anardo 4	PIERA	at (161) 8	43-0843
	(Name of Conta-	ct Person)		time Telephone Number)
Enclose	ed is a check fe	or the following amou	nt:	
DI \$150	00 Filing Fees	□\$155.00 Filing Fees	\$180.00 Filing Fees	□\$185.00 Filing Fees,
	Conversion	and Certificate of	and Certified Copy	Certified Copy, and
& \$125 f of Organ	or Articles ization)	Status		Certificate of Status
STREE	ET ADDRESS	: •	MAILING A	DDRFSS.
	ation Section	.•	Registration S	
	n of Corporati	ons	Division of C	orporations
	Building		P. O. Box 632	
	xecutive Cente		Tallahassee, F	FL 32314
i anana:	ssee, FL 3230	<i>)</i>		

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 of Conversion is: (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPOTATION (Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Florida (Fator state or if a port U.S. antity, the name of the country)
on <u>JAP 22 20/3</u> (date of organization, formation or incorporation) (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ECOENER LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: August 1) connect be prior to date of receipt or filed date was more than 90 days after the
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the
date this document is filed by the Florida Department of State; AND 2) must be the same as the effective
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 will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

. ,	
Signed this 20 day of July	20/6
Signature of Authorized Representative of Limi	ited Liability Company:
Ciameture of Authorized Depresentative:	
Signature of Authorized Representative: Printed Name: Leonard Rieca	Commanding factors
Printed Name: 2007/74/00 POELFT	Sign in the state of the state
Signature(s) on behalf of Other Business Entity:	[See Helow for required signature(s)]
Signature:	<i>4</i> • • • • • • • • • • • • • • • • • • •
Signature: Printed Name: Leanner do Riera	Title: FROICENT
Signature: Marganita de Riera Printed Name MARGANITA RISEA	
Printed Name MARGARITA RIGEA	Title: VICE TIES WONT
Signature:	
Printed Name:	Title:
Si-matauni	
Signature:Printed Name:	Title:
Timed Name.	Title.
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
TOTAL COMMENT	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In-	
in photons of Officers have not been selected, an in	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
A II ask and	
All others: Signature of an authorized person.	
Signature of an authorized 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)
*	· /- L

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Δ	RI	FT(T	F.	1.	. N	am	e.

The name of the Limited Liability Company is:

(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:	Mailing Address:
18688 SEATURTLE LANE	18689 SEA TUSTICLAS BOOM PARON FLESHING
BUCA PATON, FL 33490	BOGA LATON, FL. 33498

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:

Name

| Plate Sen Turtle LA
| Florida street address (P.O. Box NOT acceptable)

| BOCA PAION FL 33496
| 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)

Page 1 of 2

18 JUL 22 MM 10: 30

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager MGR"	Name and Address:
Mar	
AMBR	MARSAVITA KIRA

(Use attachment if necessary)	
or 90 days after the date of filing.) E: If the date inserted in this block does not me urnent's effective date on the Department of Sta	et the applicable statutory filing requirements, this date will not be listed as te's records.
TICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
X	per or an authorized representative of a member.
Signature of a memion of a memory of a mem	per or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. remation submitted in a document to the Department of State any as provided for in s.817.155, F.S.
Signature of a memion of a mem	n accordance with section 605.0203 (1) (b), Florida Statutes. rmation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.
Signature of a meml This document is executed ir I am aware that any false info constitutes a third degree felo	representation and Designation of Registered Agent

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

ARTICLE IV-