L16000180526

(Requestor's Name)	
(Address)	500
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



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09/27/16--01024--007 **150.00

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T. BURCH SEP 28 2016

COVER LETTER

Division of C					
SUBJECT: HUGO C	ALERO DDS, LLC				
		of Resulting Florida	Limited	d Company)	
				nd fees are submitted to convert an "Cocordance with s. 605.1045, F.S.	Other
Please return all corr	espondence concernin	g this matter to:			
HUGO CALERO					
	(Contact Person)				
	(Firm/Company)				
1068 NW 123 COURT	(Address)				
MIAMI, FL 33182	(* 144: 422)				
(1	City, State and Zip Code)				
BRAVOCALERO@GM	IAIL.COM				
E-mail Address: (to b	e used for future annual re	port notifications)			
For further informati	on concerning this ma	tter, please call:			
HUGO CALERO		_at (⁷⁸⁶	802-2	2266	
(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)	
Enclosed is a check f	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 and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES Registration Section Division of Corporat Clifton Building		Registra	ation S n of C	Corporations	
2661 Executive Cent Tallahassee, FL 323		Tallaha	ssee, F	FL 32314	

INHS11 (06/15)

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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	e of Other Business Entity)
2. The "Other Business Entity" is a	PORATION
(Enter	entity type. Example: corporation, limited partnership, areal partnership, common law or business trust, etc.)
First organized, formed or incorporated us	nder the laws of FLORIDA
SEPTEMBER 9, 2016	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporat	ion)
3. The name of the Florida Limited Liabi	lity Company as set forth in the attached Articles of Organization:
HUGO CALERO DDS, LLC	
	ida Limited Liability Company)
(Enter Name of Flori	da Elinica Elability Company)
4. If not effective on the date of filing, en	ter the effective date: SEPTEMBER 9, 2016
4. If not effective on the date of filing, en (The effective date: 1) cannot be prior	• • •

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

Signed this 21ST day of SEPTEMBER	20_16		
Signature of Authorized Representative of Limi	ted Liability Company:		
Signature of Authorized Representative:	Title: MEMBER	_	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	_	
Signature: Salacio Printed Name: HUGO CALERO	Title: PRESIDENT		
Signature:Printed Name:	Title:	- -	
Signature:Printed Name:	Title:	-	
Signature:Printed Name:	Title:	- -	
Signature: Printed Name:	Title:		
Signature: Printed Name:	Title:	SEP 27	` ∄ =
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.		H GEN	17 17 14 14 14 14 14 14 14 14 14 14 14 14 14
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	SD SD	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	tv Limited Partnership:		
All others: Signature of an authorized person.			
Fees:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

INICO CALERO PRE LLO		
HUGO CALERO DDS, LLC (Must end with the words "Limited L.	iability Company, "L.L.C.," or "LLC.")	<u></u>
(Mast etc Wat ale World) Ellippe E	naming company, S.E.C., or EEC.	
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
1068 NW 123 COURT	1068 NW 123 COURT	
MIAMI, FL 33182	MIAMI, FL 33182	
ARTICLE III - Registered Agent, Registe		's Signature:
(The Limited Liability Company cannot serve as its own R	ered Office, & Registered Agent	
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	ered Office, & Registered Agent legistered Agent. You must designate an indiv	vidual or another
(The Limited Liability Company cannot serve as its own R	ered Office, & Registered Agent legistered Agent. You must designate an indiv	vidual or another
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	ered Office, & Registered Agent legistered Agent. You must designate an indiv	vidual or another
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the HUGO CALERO	ered Office, & Registered Agent legistered Agent. You must designate an indiv	vidual or another
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the HUGO CALERO N	ered Office, & Registered Agent egistered Agent. You must designate an individue the registered agent are:	vidual or another
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the HUGO CALERO N. 1068 NW 123 COURT	ered Office, & Registered Agent egistered Agent. You must designate an individue the registered agent are:	vidual or another
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the HUGO CALERO N. 1068 NW 123 COURT	ered Office, & Registered Agent egistered Agent. You must designate an individue he registered agent are: ame	vidual or another

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	HUGO CALERO
	1068 NW 123 COURT
	MIAMI, FL 33182
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	그 경찰 養殖
effective date is listed, the date mu 0 days after the date of filing.)	the date of filing: SEPTEMBER 9, 2016 . (OPTIONAL st be specific and cannot be more than five business dates the specific and cannot be more than five business dates and cannot be more than five business dates and cannot be more than the specific and cannot be more than the sp
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of States.	et the applicable statutory filing requirements, this date will not be li
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of States.	et the applicable statutory filing requirements, this date will not be li
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CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of Standard CLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a mem This document is executed if am aware that any false inference.	et the applicable statutory filing requirements, this date will not be li
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of Standard CLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a mem This document is executed if am aware that any false inference.	ber or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. ber or submitted in a document to the Department of State
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of State CLE VI: Other provisions, if any. REOURED SIGNATURE: Signature of a mem This document is executed if am aware that any false infeconstitutes a third degree felometric date.	ber or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. ber or submitted in a document to the Department of State

Page 2 of 2

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

ARTICLE IV-