# L16000199956

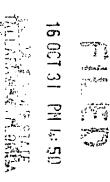
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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T. BURCH NOV 2 2016

### **COVER LETTER**

Division of C	orporations		
SUBJECT: B&M Re	al Estate, LLC		
Bobbect.	(Name	of Resulting Florida Limite	d Company)
			d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:	
Ivonne Ballestas			
<del>,</del>	(Contact Person)		
B&M Real Estate			
	(Firm/Company)		
19400 Tumberry Way, S	uite 1612		
	(Address)		
Aventura, FL 33180			
((	City, State and Zip Code)		
germanjmedina@gmail.o	com		
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
German Medina		_at (305) 54290	018
(Name of Conta	ct Person)	(Area Code) (Day	rtime Telephone Number)
Enclosed is a check f	or 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 Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions	MAILING A Registration S Division of C P. O. Box 63: Tallahassee	Section Corporations 27

INHS11 (06/15)

Tallahassee, FL 32301

TO: Registration Section

## 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.

s Entity" immediately prior to the filing of the Articles of Conversion is:
er Name of Other Business Entity)
S Corp
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
ated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
orporation)
Liability Company as set forth in the attached Articles of Organization:
of Florida Limited Liability Company)
ng, enter the effective date: 11/1/16  prior to date of receipt or filed date nor more than 90 days after the Florida Department of State; AND 2) must be the same as the effective of Organization, if an effective date is listed therein.)  s not meet the applicable statutory filing requirements, this date will not be listed as the int of State's records.

Page 1 of 2

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

Signed this 26 day of October	20_16
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: Printed Name: German Medina	Title: MGRM
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature:	Title: _MGRM
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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

ARTICLE I - Na	ıme:		
The name of the I	Limited Liability Company	y is:	
B&M Real Estate, L			
(N	fust end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ddress:		
The mailing addre	ess and street address of th	e principal office of the Limited	Liability Company is:
Principal Office	Address:	Mailing Address:	
19400 Turnberry Wa	ay, Suite 1612	19400 Turnberry Way, Suite 16	512
Aventura, FL 33180	)	Aventura, FL 33180	
		<del></del>	
(The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own F n active Florida registration.) Florida street address of the German Medina	ered Office, & Registered Agen Registered Agent. You must designate an inc the registered agent are:	dividual or another
	<del></del>	Jame	$\frac{\omega}{\omega}$
			PH PH
	19400 Tumberry Way, Suite	P.O. Box <u>NOT</u> acceptable)	
	r iorida su cet address (	1.0. Box 1101 acceptable)	3
	Aventura	FL 33180	*
	City	Zip	
liability com registered agen statutes relati	apany at the place designate at and agree to act in this co- ing to the proper and compl abligations of my position a Registered Agent's	nd to accept service of process for ed in this certificate, I hereby acceptancity. I further agree to comply lete-performance of my duties, and is registered agent as provided for Signature (REQUIRED)	ept the appointment as with the provisions of all I I am familiar with and
	(30	,	

Page 1 of 2

Company:			
Title:	Name and Address:		<del>on</del>
"AMBR" = Authorized Member			8
"MGR" = Manager			und under
MGR	German Medina	4.7	
	19400 Turnberry Way, Suite 1612	for a	<b>P</b> (559
	Aventura, FL 33180	and the same	
			ਜ਼ 🦪
MGR	Ivonne Ballestas	( 77	3
	19400 Turnberry Way, Suite 1612		
	Aventura, FL 33180		•
		·	=
	· · · · · · · · · · · · · · · · · · ·	·	·
			•
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.)  Note: If the date inserted in this block does not mee document's effective date on the Department of State	t be specific and cannot be more than t the applicable statutory filing requirements, the	five busine	ss days prio
ARTICLE VI: Other provisions, if any. N/A			<del></del>
This document is executed in I am aware that any false infor	er or an authorized representative of accordance with section 605.0203 (1) (b), Florimation submitted in a document to the Departm	ida Statutes.	
constitutes a third degree felor  German Medina	y as provided for in s.817.155, F.S.		

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

**ARTICLE IV-**

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

Page 2 of 2