217000	024539
(Requestor's Name) (Address)	400293932674
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	
(Document Number) Certified Copies Certificates of Status	01/09/1701045024 **155.00
Special Instructions to Filing Officer:	17 FEB - 1 PJ 6: 28
Office Use Only	
	M. MOON FEB-01 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 17, 2017

RAQUEL B. MOWRER 7065 WESTPOINTE BLVD., STE. 205 ORLANDO, FL 32835

SUBJECT: NEWIMOB INVESTMENTS LLC Ref. Number: W17000003752

We have received your document for NEWIMOB INVESTMENTS LLC and your check(s) totaling \$155.00. 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.

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.

Matthew T Moon Regulatory Specialist II

Letter Number: 717A00000929

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www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: <u>NEWIMOB INVESTMENTS CORP</u>

(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:

RAQUEL B. MOWRER

(Contact Person)

OGC ASSOCIATES ORLANDO CORP.

(Firm/Company)

7065 WESTPOINTE BLVD. SUITE 205

(Address)

ORLANDO, FL 32835

(City, State and Zip Code)

RAQUEL@OGCASSOCIATES.COM

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

RAQUEL B. MOWRER	_at ()	985-4404
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

\$150.00 Filing Fees	\$155.00 Filing Fees	□\$180.00 Filing Fees	□\$185.00 Filing Fees,
(\$25 for Conversion & \$125 for Articles	and Certificate of Status	and Certified Copy	Certified Copy, and Certificate of Status
of Organization)	C-MIN.		Service on 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 (08/16)

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.

1. The name of the "Other Business Entity" imn	nediately prior to the filing of the Articles of Conversion is:
NEWIMOB INVESTMENTS CORP	p15-28311

(Enter Name of Other Business Entity)

CORPORATION 2. The "Other Business Entity" is a

> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of ______

03/26/2015 on

(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:

NEWIMOB INVESTMENTS LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: 01012017(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.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Page 1 of 2

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Signed this 01 day of January	_20 <u>1</u> 7
Signature of Authorized Representative of Lipit	ed Diability Company:
Signature of Authorized Representative: Printed Name: <u>Rodrigo M. da Costa</u>	Title <u>CEO</u>
Signature(s) on behalf of Other Business Entity: 1	` See below for required signature(s)
Signature:	
Signature:Printed Name: Leda Oliveira Almenta - New Imob Negocio	
Signature: Printed Name: Rodrige Magalhads da Costa	Title: CEO
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 C If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability	y Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	v Limited Partnership:
<u>All others:</u> Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NEWIMOB INVESTMENTS LLC

(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:
100 W LUCERNE CIRCLE, SUITE 200	100 W LUCERNE CIRCLE, SUITE 200
ORLANDO, FL 32801	ORLANDO, FL 32801
ORLANDO, FL 32801	URLANDO, FL 32801

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:

City

 RODRIGO M. DA COSTA

 Name

 100 W LUCERNE CIRCLE, SUITE 200

 Florida street address (P.O. Box NOT acceptable)

 ORLANDO
 FL 32801

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 ar registered agent as provided for in Chapter 605, F.S.

Registered Agen EQUIRED)

(CONTINUED)

Page 1 of 2

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ARTICLE IV-

. .

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

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<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	TED -	
	•		
Manager / ME MBGC	RODRIGO M. DA COSTA	6: 28	
	100 W LUCERNE CIRCLE, SUITE 200 ORLANDO, FL 32801		
(llas attachment if nasaaan)		<u> </u>	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 0101/2017 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

<u>Note:</u> 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.

ARTICLE VI: Other provisions, if any.

Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes I am aware that any false information submitted in a document to the Department of Stat constitutes a third degree felony as provided for in s.817.155, F.S. RODRIGO M. DA COSTA		Court
constitutes a third degree felony as provided for in s.817.155, F.S. RODRIGO M. DA COSTA	This document is execute	d in accordance with section 605.0203 (1) (b), Florida Statutes.
	constitutes a third degree	felony as provided for in s.817.155, F.S.
I VDEO OF DEIDIEG DAIDE OF SIGNEE	RODRIGO M. DA C	Typed or printed name of signee
Filing Fees		