L17000034793

(Requestor's Name)
(Address)
(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

N. SAMS FEB 1 6 2017



600294002846

01/31/17--01011--005 **150.00

T IN 31 PH 3: II



FILED

17 JAN 31 PH 3: 14

SMERELAND STEE, FLORIDA

February 1, 2017

ALMA ABREU 1351 NE MIAMI GARDENS DR #322E MIAMI, FL 33179

SUBJECT: OCEAN VIEW REALTY, LLC

Ref. Number: W17000009223

We have received your document for OCEAN VIEW REALTY, LLC and your check(s) totaling \$150.00. 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 sign the required signature under Signatures on behalf of Other Business Entity.

Please return the corrected original and one copy of 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.

Nadira D McClees-Sams Regulatory Specialist II New Filing Section

Letter Number: 017A00002032

COVER LETTER

TO:	Registration S Division of C			
CUDI		Ocago 1	lieus Dan	H. LIC
SUBJ	ECI:	(Name of Res	ulting Florida Limited Con	ppany)
				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:	
	Q.(v	na Qbr	eu	
$\overline{\mathcal{L}}$	cean	(Contact Person)	elly	
/3	51 NE	(Firm/Company) Miami Q	ardeus Dr	a Apt 322E
~ V	Nicim	(Address)	179	
Q	•	City, State and Zip Code)	3mail co	laa
E-m		e used for future annual rep		/ r i
For fu	rther information	on concerning this mat	tter, please call:	
(Q/ma	Ubrey	at (954) 9 (Area Code) (Day	400657
	(Name of Conta	ct Person)	(Area Code) (Day	time Telephone Number)
		or the following amou a bank located in the l	•	ed by this office must be payable in US
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	\$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
STRE	ET ADDRESS	S:	MAILING A	ADDRESS:
	ration Section	,	Registration S	
	on of Corporati 1 Building	ions	Division of C P. O. Box 632	
	Executive Cent	er Circle	Tallahassee, I	
			,	

INHS11 (08/16)

Tallahassee, FL 32301

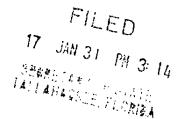
Articles of Conversion

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" immediately prior to the filing of the Articles of Conversion is: OCEAN VICUS Business Entity) (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
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
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Cean Vew Realty LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (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

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.

7 6	. —
Signed this 2 day of February	_ 20/
Signature of Authorized Representative of Limi	<u>~ 7 ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~</u>
	Marca 1 1222
Signature of Authorized Representative: Printed Name: Alma Uhreu	and deep
Printed Name: Ulma Ubreu	_ Title:
Signature(s) on behalf of Other Business Entity:	· · · · · · · · · · · · · · · · · · ·
Signature: Signature:	
Signature: Alma Olbrea	Title: manager
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	77.4
Printed Name:	I itle:
Signatura	
Signature:Printed Name:	Title
Timicu Name	
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	y Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:
Signatures of ALL General Partners.	
All others	
All others:	
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)
	TT - TT TT TT TT TT TT TT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company, "L.L.C.," or "L.C.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
11098 Biscayne Blui 1351 NE Momigarden Suite 401 Apt 322 E Miami FC 33161 Miami, FC 33179
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 1351 NE Miami gardens Dr Apt 322E Florida street address (P.O. Box NOT acceptable)
Miami, FL 33179 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

Company:	son authorized to manage and control the Limited Liability
Title: "AMBR" = Authorized Member "MGR" = Manager Than 290	Name and Address: 1351 NE Migmi Garden Apt 322 E
	
	
(Use attachment if necessary)	AL AL CONTROLLAR (OPTIONIAL)
RTICLE V: Effective date, if other than an effective date is listed, the date mu or 90 days after the date of filing.)	eet the applicable statutory filing requirements, this date will not be listed as
RTICLE V: Effective date, if other than an effective date is listed, the date mu or 90 days after the date of filing.) te: If the date inserted in this block does not me nument's effective date on the Department of States.	est be specific and cannot be more than five business days pre-
RTICLE V: Effective date, if other than an effective date is listed, the date mu or 90 days after the date of filing.) te: If the date inserted in this block does not me nument's effective date on the Department of States.	est be specific and cannot be more than five business days pre-
RTICLE V: Effective date, if other than an effective date is listed, the date mu or 90 days after the date of filing.) te: If the date inserted in this block does not me nument's effective date on the Department of Statement's effective date on the Department of Statement's Other provisions, if any. REQUIRED SIGNATURE: Signature of a mem This document is executed in I am aware that any false inforconstitutes a third degree felor	ber or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. ormation submitted in a document to the Department of State only as provided for in s.817.155, F.S.
RTICLE V: Effective date, if other than an effective date is listed, the date mu or 90 days after the date of filing.) te: If the date inserted in this block does not me nument's effective date on the Department of Statement's effective date on the Department of Statement's Other provisions, if any. REQUIRED SIGNATURE: Signature of a mem This document is executed in I am aware that any false inforconstitutes a third degree felor	ber or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. ormation submitted in a document to the Department of State on yas provided for in s.817.155, F.S.
RTICLE V: Effective date, if other than an effective date is listed, the date mutor 90 days after the date of filing.) te: If the date inserted in this block does not meanment's effective date on the Department of Statement's effective date on the Department of Stateme	ber or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. comparison submitted in a document to the Department of State