L17000043071

(Re	questor's Name)	
(Address)		
(Ada	dress)	
(Cit	y/State/Zip/Phone	:#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
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01/24/17--01008--019 **35.00

02/15/17--01019--017 **115.00

ALLAHASSEE FLORING

11/2/2/17

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SOKAI GROUP LLC (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:
ALEX MONTENO (Contact Person)
$\frac{7821 \text{ CORAL WAY } \#135}{\text{MIANI, } FL 33155}$ (City. State and Zip Code)
MIANI FC SS/35
ACEX MONTERO CPA @ GMAIL. COM E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
ALEX MONTERO at (315) 2652293 (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)
\$\frac{150.00}{25}\$ Filing Fees (\$\\$155.00\$ Filing Fees and Certificate of Status (\$\\$155.00\$ Filing Fees and Certified Copy (\$\\$185.00\$ Filing Fees and Certified Copy (\$\\$125\$ for Articles of Organization) (\$\\$185.00\$ Filing Fees and Certified Copy (\$\\$185.00\$ Filing Fees (\$\\$185.00\$ Filing F
STREET ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301



February 15, 2017

ALEX MONTERO CPA PA 7821 CORAL WAY #135 MIAMI, FL 33155

SUBJECT: SOKAI GROUP LLC Ref. Number: W17000006894

We have received your document for SOKAI GROUP LLC and your check(s) totaling \$150.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

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.

You may call me direct at 850-245-6067 when you file the 2017 Annual Report then I call file the Conversion.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 417A00001548

Division of Compositions D.O. DOV COOT Mullely Service Service 2001

Articles of Conversion For

17 FEB 27 PM 3: 02

"Other Business Entity" Into

SECRE SAIT OF STATE MALLAHASSEE FLORIDA

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on 4/14/15 (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:
SOKAI GROUP LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: TAN 1, 2017 (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

- 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.

`	
Signed this 6 day of FEB	20 17
Signature of Authorized Representative of Line	ted Liability Company:
Signature of Authorized Representative:	MILE: MANAGING MEMBER
Signature(s) on behalf of Other Business Epolity	
Signature: Printed Name: TESUS LEON	Title: PRES
Printed Name: DESUS LEON	Title: PRES
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Tial.
Printed Name:	
Signature:Printed Name:	
Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc	
<u>If Florida General Partnership or Limited Liabilit</u> Signature of one General Partner.	y Partnership:
<u>If Florida Limited Partnership or Limited Liabilit</u> Signatures of <u>ALL</u> General Partners.	v 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 - Name: The name of the Limited Liability Company is:
SOKAI GROUP 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:
10726 NW 74 ST #104 10726 NW 74 ST 100 DORAL, FL 33178 DORAL, FL 33178
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:
The name and the Florida street address of the registered agent are: JESUS' LEON Name
Name
Name 10726 NW 7457 104 Florida street address (P.O. Box NOT acceptable) PL 33178 City Zip
Florida street address (P.O. Box NOT acceptable)
DIRAC FL 33178 City Zip
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.	
<u>Title:</u> "AMBR" ≈ Authorized Member	Name and Address:
"MGR" = Manager AMBR / MGR	JESUS LEON 10726 NW 74 ST #104 DORAL, FC 33178
AMBR/MGR	JESUS MENESES 10126 NW 145T H104 DORAC FC 33178
	· .
(Use attachment if necessary)	
(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 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.	
	mes T
REQUIRED SIGNATURE:	STATE FLORIDA

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

ARTICLE IV-

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 State constitutes a third degree follows as provided for in s.817.155, F.S.

LEON 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) \$ 5.00 Certificate of Status (Optional) Page 2 of 2