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T. BURCH JUL 28 2017

# COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: SAVAGE HOLDINGS, LLC	
(Name of R	lesulting Florida Limited Company)
The enclosed Articles of Conversion And	icles of Organization, and fees are submitted to convert an "Other Liability Company" in accordance with s. 605.1045, F.S.
and opposite the concerni	ing this matter to:
JUAN J. PEREZ	
(Contact Person) PEREGONZA LAW GROUP, PLI.C	
(Firm/Company) 1414 NW 107TH AVE. SUITE 302	
(Address)	
DORAL, FL 33172	
(City, State and Zip Code) OFFICE@PEREGONZA.COM	
E-mail Address: (to be used for future annual re	eport notifications)
For further information concerning this ma	
JUAN J. PEREZ	at () 650-0202
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the	· · · · · · · · · · · · · · · · · · ·
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  C\$155.00 Filing Fees and Certificate of Status	and Certified Copy  Certified Copy, and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

INHS11 (6/17)



July 26, 2017

JUAN J. PEREZ 1414 NW 107TH AVE STE 302 DORAL, FL 33172

SUBJECT: SAVAGE HOLDINGS, LLC

Ref. Number: W17000061293

We have received your document for SAVAGE HOLDINGS, 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 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.

Letter Number: 717A00015032

Tim Burch Regulatory Specialist III

www.sunbiz.org

# **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 Liabillty Company in accordance with s.605.1045, Florida

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
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
09/26/2016 (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:
(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 calendar 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 the same as the
effective date listed in the attached Articles of Organization, if an effective date is listed therein.) 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.

Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative:	
Printed Namc:	Title
Simple A	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s]
Signature: 3	
Printed Name:	Title:
Signature:	
Printed Name Jordan Schlosser	
Motor Schlosser	Title:
Signature:	
Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
rinted Name.	
rinted Name:	1 itte:
If Florida Corporation:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir	Officer. acorporator must sign.
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabil.	Officer. acorporator must sign.
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir If Florida General Partnership or Limited Liabit Signature of one General Partner.	Officer. scorporator must sign. ity Partnership:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabit Signature of one General Partner.  If Florida Limited Partnership or Limited Liabit	Officer. scorporator must sign. ity Partnership:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabit Signature of one General Partner.  If Florida Limited Partnership or Limited Liabit	Officer. scorporator must sign. ity Partnership:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabit Signature of one General Partner.  If Florida Limited Partnership or Limited Liabit Signatures of ALL General Partners.  All others:	Officer. scorporator must sign. ity Partnership:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabit Signature of one General Partner.  If Florida Limited Partnership or Limited Liabit Signatures of ALL General Partners.  All others:	Officer. scorporator must sign. ity Partnership:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liability Signature of one General Partner.  If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.  All others: Signature of an authorized person.	Officer. scorporator must sign. ity Partnership:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liability Signature of one General Partner.  If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.  All others: Signature of an authorized person.	Officer. scorporator must sign. ity Partnership:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabil Signature of one General Partner.  If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.  All others: Signature of an authorized person.	Officer. scorporator must sign. sity Partnership: sity Limited Partnership:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabilistic Signature of one General Partner.  If Florida Limited Partnership or Limited Liabilistic Signatures of ALL General Partners.  All others: Signature of an authorized person.  Gees:  Articles of Conversion:	Officer. accorporator must sign. aity Partnership: aity Limited Partnership: \$25.00
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabil Signature of one General Partner.  If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.  All others: Signature of an authorized person.	Officer. scorporator must sign. sity Partnership: sity Limited Partnership:

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
SAVAGE HOLDINGS, LLC	
(Must contain the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12126 GLACIER BAY DR	12126 GLACIER BAY DR
BOYNTON BEACH, FL 33473	BOYNTON BEACH, FL 33473
business entity with an active Florida registration.)  The name and the Florida street address  PEREGONZA LAW GR	
1414 NW 107TH AVE,	
<del></del>	ss (P.O. Box NOT acceptable)
DORAL	FI 33172
City	Zip
registered agent and agree to act in this statutes relating to the proper and cor	nt and to accept service of process for the above stated limited mated in this certificate, I hereby accept the appointment as a capacity. I further agree to comply with the provisions of all miplete performance of my duties, and I am familiar with and in as registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

	The name and address of each person Company:	
	<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	JORDAN SCHLOSSER	
	12126 GLACIER BAY DR	
		BOYNTON BEACH, FL 33473
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ARTI	(Use attachment if necessary)  CLE V: Effective date, if other than the effective date is listed, the date was the	date of filing: (OPTIONAL)
to or 9 Note: 1 docume	CLE V: Effective date, if other than the effective date is listed, the date must be do days after the date of filing.) If the date inserted in this block does not meet the ent's effective date on the Department of State's	date of filing: (OPTIONAL)  De specific and cannot be more than five business day  De applicable statutory filing requirements, this date will not be list records.
to or 9 Note: 1 docume	CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  If the date inserted in this block does not recent the	and cannot be more man five business day
to or 9 Note: 1 docume	CLE V: Effective date, if other than the effective date is listed, the date must be do days after the date of filing.) If the date inserted in this block does not meet the ent's effective date on the Department of State's	and cannot be more man five business day
to or 9 Note: 1 docume	CLE V: Effective date, if other than the effective date is listed, the date must be do days after the date of filing.) If the date inserted in this block does not meet the ent's effective date on the Department of State's CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of the provision of the day of the entire document is even to be a state of the entire day.	or an authorized representative of a member.  ordance with section 605.0203 (1) (b), Florida Statutes.
to or 9 Note: 1 docume	CLE V: Effective date, if other than the effective date is listed, the date must be do days after the date of filing.)  If the date inserted in this block does not meet the ent's effective date on the Department of State's CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of the provision of the provision of the entire o	or an authorized representative of a member.  ordance with section 605.0203 (1) (b), Florida Statutes.