## 617000187728

(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:
L

Office Use Only



000303155010

09/01/17--01011--002 \*\*150.00

17 SEP -1 AH 9: 40

T. BURCH SEP \_ 5 2017

## COVER LETTER

то:	New Filing So Division of Co				
SUB.	JECT: XIRIUS, I	LLC			
1,01,		(Name of Res	sulting Florida Limi	ted Con	ipany)
		· · · · · · · · · · · · · · · · · · ·	_		d fees are submitted to convert an "Othe ecordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concernin	g this matter to:		
JORG	E L MARTINEZ, 0	CPA			
		(Contact Person)		-	
MAR	TINEZ-MARQUEZ	Z, CPA, PA			
		(Firm/Company)		=	
6303 ł	BLUE LAGOON D	R. SUITE 200			
		(Address)		-	
MIAN	41, FL 33126				
	((	City. State and Zip Code)		-	
jorge@	@mgccpa.net				
E-1	mail Address: (10 b	e used for future annual re	port notifications)	_	
For fi	arther information	on concerning this ma	tter, please call:		
Jorge	Martinez, CPA		_at ( <u>a</u> t (	274-2	626
***	(Name of Conta	et Person)	(Area Code	(Day	time Telephone Number)
		or the following amou a bank located in the		process	sed by this office must be payable in US
(\$25 fd & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
New Divis Clifto 2661	EET ADDRESS Filing Section ion of Corporati on Building Executive Cent hassee, FL 3230	ions er Circle	New F Divisio P. O. I	iling S on of C Box 631	Corporations

## Articles of Conversion For "Other Business Entity" Into

17 SEP -1 AH 9: 1:0

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> 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: XIRIUZ INC.
(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
(Enter state, or if a non-U.S. entity, the name of the country)
06/02/2015 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
XIRIUZ LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: 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.)
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.

Signed this 27 day of AUGUST	20_17
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: ANGELICA REY	Title: MANAGER
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature Printed Name RATUNA REY	Title: PRESIDENT
Signature: Printed Name:	Tisto
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
If Morida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty 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)

Suffer Successive with a 100

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

XIRIUZ LLC					
(Must contain the words	Limited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address:					
The mailing address and street add	ess of the principal office of the Limited Liability Company				
Principal Office Address:	Mailing Address:				
	2413 MAIN STREET, #111				
2413 MAIN STREET, #111	2413 MAIN STREET, #111				
MIRAMAR, FL 33025  ARTICLE III - Registered Agen The Limited Liability Company cannot serve business entity with an active Florida registr.					
ARTICLE III - Registered Agen The Limited Liability Company cannot serve business entity with an active Florida registr. The name and the Florida street ac	Registered Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an individual or another on.) ress of the registered agent are:				
ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registration	MIRAMAR, FL 33025  Registered Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an individual or another on.) ress of the registered agent are: NEZ, CPA				
ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registr.) The name and the Florida street ac	Registered Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an individual or another on.) ress of the registered agent are:				
(The Limited Liability Company cannot serve business entity with an active Florida registr.)  The name and the Florida street active	Registered Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an individual or another on.) ress of the registered agent are:  NEZ, CPA  Name  OON DR, SUITE 200				
ARTICLE III - Registered Agen The Limited Liability Company cannot serve business entity with an active Florida registr. The name and the Florida street active Florida Street Agen Florid	Registered Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an individual or another on.) ress of the registered agent are:  NEZ, CPA  Name				
ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registr.) The name and the Florida street active florida street	Registered Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an individual or another on.) ress of the registered agent are:  NEZ, CPA  Name  OON DR, SUITE 200  ddress (P.O. Box NOT acceptable)				

(CONTINUED)

Registered Agent's Signature (REQUIRED)

<u>lltle:</u> 'AMBR" - Authorized Member 'MGR" - Manager	Name and Address:
AMBR	EEYO, LLC
	2413 MAIN STREET, #111
	MIRAMAR, FL 33025
<u> </u>	
· · · · ·	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
· · · · · · · · · · · · · · · · · · ·	<del> </del>
REQUIRED SIGNATURE:	
* And Con	
Signature of a member or a	n authorized representative of a member
This document is executed in accordance of any false information submitted in a document provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware that sent to the Department of State constitutes a third degree felon
ANGELICA BEV	
ANGELICA REY	ed or printed name of signee

ARTICLE IV-