# 117000201806

(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



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09/28/17--01025--007 \*\*150.00

17 SEP 20 - 2410: 42

SEP 29 2017

T SCHROEDER

#### COVER LETTER . . . .

TO: New Filing Division of	Section Corporations				
SUBJECT: BP 11	•				
SORTECT:	(Name of Re	sulting Florida Limit	ed Com	npany)	
				d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.	
Please return all co	orrespondence concernin	g this matter to:			
Carlos E Casuso, Esq					
	(Contact Person)				
Law office of Carlos I	E Casuso				
	(Firm/Company)				
8251 Sw 52nd ave					
<u> </u>	(Address)				
Miami Fla. 33143					
	(City, State and Zip Code)	·			
Carlos@casusogroup.	,				
	o be used for future annual re	port notifications)			
		•			
For further inform	ation concerning this ma	tter, please call:			
Carlos E Casuso		at ( <u></u>	66788	892	
(Name of Co	ntact Person)	(Area Code)	(Day	time Telephone Number)	
	k for the following amou on a bank located in the		rocess	sed by this office must be payable in US	
■ \$150.00 Filing Fee (\$25 for Conversion & \$125 for Articles of Organization)	s □\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRE	ESS:	MAILI	NG A	.DDRESS:	
New Filing Section			New Filing Section		
Division of Corporations		Division of Corporations			
Clifton Building		P. O. Box 6327			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

### **Articles of Conversion**

For

#### "Other Business Entity"

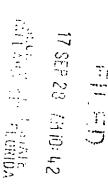
Into

#### 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.

BP 11710. Corp PL — PLO — BUSINESS Entity immediately prior to the filing of the Afficies 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 [Florida]  (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
10/25/2016
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BP11710, 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 19 day of September	20 <u>17</u>
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: * Printed Name: Henry Dow	Title: Managing Member
Signature(s) on hehalf of Other Business-Entity:	See below for required signature(s)
Signature: * ) [ ]	
Printed Name: Henry Dow	Title: Incorporator
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	Tion.
Frinted Name.	
Signature:Printed Name:	Title
Signature:Printed Name:	Title
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnersnip:
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:	\$25.00 \$125.00 \$30.00 (Optional)

Certificate of Status:

\$30.00 (Optional) \$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company BP11710, LLC	rice		
RP11710 11 C	(18.		
RP11710 11 C			
DC 11719, EEC			
(Must contain the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
	e principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
555 NW 95th Street	555 NW 95th Street		
Miami Florida 33150	Miami Florida 33150		
Henry Dow	ame		
555 NW 95th Street Florida street address (	P.O. Box NOT acceptable)		
	· · · · · ·		
rioriua street audress (			
Miami	FL 33150		
	FL 33150 Zip		
Miami City  Having been named as registered agent an liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and comple	Zip  Zip  and to accept service of process for the above stated limited and in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and a registered agent as provided for in Chapter 605, F.S		

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Henry Dow 555 Nw 95 St Miami, Fl 33143
MGR	Nicolas Velez 555 NW 95 st Miami, Fl. 33150
	17 SEF
(Use attachment if necessary)	20 20 20 20
ARTICLE V: Other provisions, if any,	9 15 15 15 15 15 15 15 15 15 15 15 15 15
REQUIRED SIGNATURE:	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Ту	ped 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)