L17000247175

(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:	

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12/04/17--01001--010 **180.00

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Filing Cover Sheet

To: Florida Division of Corporations

From: Kim Tadlock C/O Capitol Services, Inc.

Date: 12/1/2017

Trans#: 945752

Entity Name:

PIM THREE CORPORATION CONVERTING INTO PIM THREE LLC Articles Incorporation () Articles of Amendment () Articles of Dissolution () Annual Report () Conversion (XX) Fictitious Name () Foreign Qualification () Limited Liability () Limited Partnership () Merger () Withdrawal / Cancellation (Reinstatement () Other () STATE FEES PREPAID WITH CHECK#1110 FOR \$180.00

PLEASE RETURN:

Pertified Copy (XX) 🗍 Plain Photocopy ()

Good Standing () Certificate of Fact ()

Phone: 855-498-5500

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: PIM THREE CORPORATION (D17(000)91531)
(Enter Name of Other Business Entity) (D12030091531)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
OCTOBER 31, 2012
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PIM THREE 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 48 day of NOVEMBER	20_17
Signature of Authorized Representative of Limi	
Ciamatana a Citamatana di Dunasana da Siamatana	////
Signature of Authorized Representative: Printed Name: THEODORE STOHNER	Title: DIRECTOR
Printed Name; Theodoric STORNER	Title: DIRECTOR
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: THEODORE STORNER	Title: MANAGER
Signature:	
Printed Name:	Title:
Cincatura.	
Signature:Printed Name:	Title
Frinted Name.	1 kie
Signature:	
Signature:Printed Name:	Title:
Signature:	TC'-1
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 Interpretation of Control o	corporator must sign. ty Partnership:
All othorns	
All others: Signature of an authorized person.	
Fccs:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

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

Certified Copy:

Certificate of Status:

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR F	LORIDA LAMITED IAADILATI COMI ANT		
ARTICLE I - Name: The name of the Limited Liability Company is:			
PIM THREE LLC			
(Must contain the words "Limited Liabil	ity 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:		
12550 BISCAYNE BLVD.	12550 BISCAYNE BLVD.		
#110	#110		
NORTH MIAMI, FL 33181	NORTH MIAMI, FL. 33181		
The name and the Florida street address of the ANTONIO REGOJO Name			
12550 BISCAYNE BLVD., #1	10		
Florida street address (P.6	·····		
NORTH MIAMI	FL 33181		
City	Zip		
liability company at the place designated in registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of a performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S		

(CONTINUED)

ARTICLE IV-			
The name and address of each per	rson authorized to manage and	d control the Limited	l Liability
Company:			

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	THEODORE STOHNER
MANAGER	12550 BISCAYNE BLVD., #110
	NORTH MIAMI, FL. 33181
	NORTH WIMMIL PT. 33181
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
	
REQUIRED SIGNATURE:	• 1
MINOR DIGITAL	##_
7.70	TV
Signature of a member or	an authorized representative of a member

any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

THEODORE STOHNER, MEMBER

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)