# L1700249633

(	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.
	,
<u> </u>	



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12/06/17--01010--004 \*\*180.00

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Office Use Only



# 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 TWO CORPORATION CONVERTING INTO PIM TWO LLC -

Articles Incorporation ( ) Articles of Amendment ( )

Articles of Dissolution ( ) Annual Report ( )

Conversion (XX) Fictitious Name ( )

Foreign Qualification ( ) Limited Liability ( )

Limited Partnership () Merger ()

Reinstatement ( ) Withdrawal / Cancellation ( )

Other ( )

STATE FEES PREPAID WITH CHECK#1109 FOR \$180.00

#### **PLEASE RETURN:**

Certified Copy (XX) Plain Photocopy ()

Good Standing () Certificate of Fact ()

17 DEC -1 AH 1:47

# 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 TWO CORPORATION  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
(Enter state, or if a non-U.S. entity, the name of the country)
OCTOBER 31, 2012
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:
PIM TWO 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.

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 day of NOVEMBER	20 17
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	<del>77  </del>
Printed Name: THEODORE STOHNER	Title: DIRECTOR
Signature(s) on behalf of Other Business Entity:	
Signature.	
Printed Name: THEODORE STOHNER	Title: MANAGER
C'anatana	
Signature:Printed Name:	Title:
Fillited Name.	1146
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Intle:
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 Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership;
All others: Signature of an authorized person.	
Fccs:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

TIT DEC - 1 AND INTERNAL

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:
PIM TWO LLC	
(Must contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ne principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
12550 BISCAYNE BLVD.	12550 BISCAYNE BLVD.
	12550 BISCAYNE BLVD. #110
#110 NORTH MIAMI, FL 33181  ARTICLE III - Registered Agent, Regist	#110 NORTH MIAMI, FL 33181 ered Office, & Registered Agent's Signature:
#110 NORTH MIAMI, FL 33181  ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	#110 NORTH MIAMI, FL 33181  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
#110 NORTH MIAMI, FL 33181  ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of  ANTONIO REGOJO	#110 NORTH MIAMI, FL 33181  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another  the registered agent are:
#110 NORTH MIAMI, FL 33181  ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of  ANTONIO REGOJO	#110 NORTH MIAMI, FL 33181  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
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#110 NORTH MIAMI, FL 33181  ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of ANTONIO REGOJO  12550 BISCAYNE BLVD.	#110 NORTH MIAMI, FL 33181  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another  the registered agent are:
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#110 NORTH MIAMI, FL 33181  ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of  ANTONIO REGOJO  12550 BISCAYNE BLVD. Florida street address	#110 NORTH MIAMI, FL 33181  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another  the registered agent are:  Name  #110 (P.O. Box NOT acceptable)

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)



<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MANAGER	THEODORE STOHNER
	12550 BISCAYNE BLVD., #110
	NORTH MIAMI, FL 33181
<u> </u>	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	_
TH	
Signature of a member or	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

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\$ 5.00 Certificate of Status (Optional)