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(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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SEGRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 12 2017 T SCHROEDER

COVER LETTER

Division of C	orporations			
SUBJECT: M & P G	LASS LLC			
<u></u>	(Name of Res	alting Florida Limited	d Comp	pany)
				fees are submitted to convert an "Othe cordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
PEDRO PALACIOS DU	MOIS			
	(Contact Person)			
MARTINEZ PALACIO	S WINDOWS AND DOOF	RS CORP		
	(Firm/Company)			
4298 NW SOUTH TAM	IAMI CANAL DRIVE AI	PT 15		
	(Address)			
MIAMI FL 33126				
((City, State and Zip Code)			
DUMOIS01@GMAIL.C	ОМ			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter inlease call:		
		•	7.0000	20
PEDRO PALACIOS DU	MOIS	_at (305)	748529	ime Telephone Number)
(Name of Conta	ect Person)	(Area Code)	(Dayt	ime Telephone Number)
	for the following amou a bank located in the		ocesse	ed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing F and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAILI	NG A	DDRESS:
New Filing Section		New Filing Section		
Division of Corporations		Division of Corporations		
Clifton Building 2661 Executive Cent	er Cirola	P. O. Be		7 L 32314
Tallahassee, FL 323	=	танапаѕ	scc, r	L 04914

TO: New Filing Section

Articles of Conversion

For

"Other Business Entity"

lnto

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: MARTINEZ PALACIOS WINDOWS AND DOORS CORP (P17000042499)
(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
05/10/2017 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:
M & P GLASS 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	s day of 12/06	_ 20_17
Signature	of Authorized Representative of Limi	ted Liability Company:
Signature of Printed Na	of Authorized Representative: F	Tillo Persident
	(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Na	me Pecho Polacios Duriois	Title: Pracident
		7 THO
Printed Na	me:	Title:
Signature:		
Printed Na	me:	Title:
Signature:	me:	Title
Signature: Printed Na	me:	Title:
Signature:		
Printed Na	me:	Title:
Signature of	Corporation: of Chairman, Vice Chairman, Director, or some of Officers have not been selected, an Inc.	
	General Partnership or Limited Liabili of one General Partner.	ty Partnership:
	Limited Partnership or Limited Liabili of Al.L General Partners.	ty Limited Partnership:
All others Signature	: of an authorized person.	
Fees:		
Fe Ce	ticles of Conversion: es for Florida Articles of Organization: rtified Copy: rtificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

S:	
fity Company, "L.L.C.," or "LLC.")	
principal office of the Limited	Liability Company is:
Mailing Address:	
4298 NW SOUTH TAMIAMI	CANAL DRI
APT 15	
MIAMUFL 33126	
and cheeps of the state of the	49 612
e registered agent are:	
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CANAL DRIVE APT 15	SSE SARY
O. Box NOT acceptable)	me > m
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to accept service of process fo	r the above stated limited
	in Origina 1005, 1 .s
(0.20)	
gnature (REQUIRED)	
gnature (REQUIRED)	n Chapter 605, F.S
	ed Office, & Registered Ager gistered Agent. You must designate an in e registered agent are: CANAL DRIVE APT 15 O. Box NOT acceptable) FL 33126 Zip to accept service of process for in this certificate, I hereby acceptainty. I further agree to comply the performance of my duties, and registered agent as provided for

(CONTINUED)

A	RT	IC1	F	W_{-}
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The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	W7070 0 No. 1 A W 0 0 NO. 1 0 W	
PRESIDENT.	PEDRO PALACIOS DUMOIS	
	4298 NW SOUTH TAMIAMI CANAL DRIVE APT	
	MIAMI FL 33126	·
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	<u> </u>	AM 10: 45
(Use attachment if necessary)	C C	ō
	<u> </u>	<u>:-</u>
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CLE V: Other provisions, if any.		
		-
REQUIRED SIGNATURE:		
Signature of a member or	an authorized representative of a member	•
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, I am aware t	hat
any false information submitted in a docu	ment to the Department of State constitutes a third degree fel-	опу
as provided for in s.817.155, F.S.		
	10 Polocios Dunois	
Tv	ped or printed name of signee	
.,	Filing Face	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)