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(F	Requestor's Name)	
(/	Address)	-
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(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
([Document Number)	
ertified Copies	Certificates of S	Status
Special Instructions to Filing Officer:		

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SECRETARY OF STATE ORIGINAL PROPERTY OF STATE OR TO SECRETARY OF SECRETA

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COVER LETTER

TO: New Filing Son Division of C			
SUBJECT: FG	GROUP (ON) (Name of Res	VLTING LL ulting Florida Limited Con	npany)
		_	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:	
LEANDRO	CARVALHO		
FG GROU	(Contact Person) P (ON SULTI (Firm/Company)	NG LLC	
3259 CLI	VT MOORE RO), APT 106	
	V FL 33 4 5 City, State and Zip Code)		•
E-mail Address: (to b	GLOBO. COM he used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
LEANILO (Name of Conta	CARVALHO act Person)	_at (<u>786</u>) 6 (Area Code) (Day	71-9854 rtime Telephone Number)
	or the following amou a bank located in the		sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□S155.00 Filing Fees and Certificate of Status	S180.00 Filing Fees and Certified Copy	S185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAILING A	ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

Into

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.

Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: FACE GARDEN CORP. TICE BODD.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>CORPORATION</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of <u>FLORIDA</u> (Enter state, or if a non-U.S. entity, the name of the country)
on O1 2016 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
FG GROUP CONSULTING LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: O1 118. (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. PLED PROPRES FORD AND PROPRES FORD FOR
47

Signed this 15 day of IECEMBER	20 <u></u> 7			
Signature of Authorized Representative of Lin	mited Liability Company:			
Signature of Authorized Representative: Printed Name: LEANDLO CARVAL NO	Title: MEMBER	-		
Signature(s) on behalf of Other Business Entity	: [See below for required signature(s)]			
Signature: ALLANDKO CARVALHO Printed Name: LEANDKO CARVALHO	Title: CHAIRMAN	-		
Signature: Tulian CARVALHO	Tille PURCI AFNT			
Signature:Printed Name:	Title:	_		
Signature:Printed Name:	Title:	-		
Signature:	CP 1			
Printed Name:			17 DEC	Petra
Signature:Printed Name:	Title:	ORETARY AHASSE	C 27	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, o		OF ST	PM 9:	ED
If Directors or Officers have not been selected, an If Florida General Partnership or Limited Liab		RIDA ARIDA	: 23	
Signature of one General Partner.	micy running.	•••		
If Florida Limited Partnership or Limited Liab Signatures of <u>ALL</u> General Partners.	ility 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)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

F G	GROUP	CONSULTING	LLC	
		the words "Limited Liability Compa		

ARTICLE II - Address:

Principal Office Address:

ARTICLE I - Name:

The name of the Limited Liability Company is:

CLINT MOORE RO

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Sig (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual obusiness entity with an active Florida registration.)	nature: r another	•	
The name and the Florida street address of the registered agent are:			
LEANDRO CARVALHO	17 DEC	T	
Name	27	-	
3259 CLINT MOOK RD, APT 106 =			
Florida street address (P.O. Box NOT acceptable)			
BOG RATION FL 33496 = 5	23		
City Zip			

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)

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager AMBL AMBL	LEANDRO F. C. CARVALHO 3259 CLINT MODE RD, APT 106 BOGA RATON, FL 33 496 JULIANA B. V. CARVALHO 3259 CLINT MODE RD, APT 106 BOGA RATON, FL 33 496
(Use attachment if necessary)	SEGRE TALLAH
ARTICLE V: Other provisions, if any.	C27 PH NASSER F
REQUIRED SIGNATURE:	9 23
This document is executed in accordance w	n authorized representative of a member ith section 605.0203 (1) (b), Florida Statutes. I am aware that ent to the Department of State constitutes a third degree felony
LE AND	OLO F. (. (ARVALHO ed or printed name of signee
Type	to or printed name or signer

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)