# 118000018909

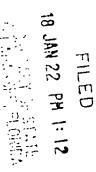
(Requestor's Name)
(Address)
(6.14,)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
<del></del>
Special Instructions to Filing Officer:





600307945506

01/22/18--01011--022 \*\*155.00



T. BURCH

JAN 24 2018 T. BURCH

### COVER LETTER

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  4010 COAST HAD LLC EXECUTIVE Ground
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of New Je(Sey (Enter state, or if a non-U.S. entity, the name of the country)
on 05-06-2008 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
GOID COAST LIMO 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 17th day of January	20_\8
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	NAM.
Printed Name: Beinie O(Hz	Titl DCP
Printed Name: Backite Offic	little: FOR
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name: Maria Cecilia Ortiz	DA A
Printed Name: Maria (Lalia Ortiz	Title: M G R
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	777.4
Printed Name:	Ittle:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	om.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
If Directors of Officers have not been selected, an in-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
TARL THE T. T. A. D	
If Florida Limited Partnership or Limited Liabilizer Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ALL General Farthers.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Gold (Must contain the w	COAST	LIMO L	L.C" or "LLC."	)
ARTICLE II - Address: The mailing address and street	address of the p	principal offic	ce of the Lim	ited Liability Company is
Principal Office Address:		Mailing 4	Address:	
8127 NW 128th Parkland FL.3	1ane 3016			
ARTICLE III - Registered A (The Limited Liability Company cannot a business entity with an active Florida re The name and the Florida street	serve as its own Reg gistration.)	istered Agent, Yo	nu must designate	
	Bernie	$e^{-017}$	12	
8127	HW 129 rect address (P.	3th lan	e	
Pack	land	FI	33076	9
	City		Zip	
Having been named as registed liability company at the pieregistered agent and agree to	lace designated act in this cape	in this certificacity. I furthe	cate, I hereby r agree to con	accept the appointment as

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Bernie Oltiz
	8/21 NW 128 Jane Palkland FL 3307
MGR	Maria-Cacilia O(tiz
	8127 NW 128 Jane Packland FL 35
	JAN F
<del></del>	77 FILE
(Use attachment if necessary)	ORDA 7
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	

Bernie Ortiz
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)

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 that 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.