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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone #))
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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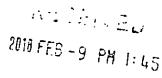
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ECRETARY OF STATE

2018 FEB -9 PM 5: 24

K. PAGF





FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2018

SANTIAGO L VALDARRAMA DEL PINO 9155 DUPONT PL WELLINGTON, FL 33414

SUBJECT: TIDEILY LLC Ref. Number: W18000009577

We have received your document for TIDEILY LLC and your check(s) totaling \$180.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page Regulatory Specialist II

Letter Number: 918A00001937

To whom it may concern,

Attached is the 2018 Annual Depart

as requested.

Thanks, Santiary L. Joldaniama

www.sunbiz.org

COVER LETTER

то:	New Filing Se Division of C				
SUB,	JECT: TIDEILY	LLC.			
			ulting Florida Limite	d Con	npany)
			•		d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concerning	g this matter to:		
Santia	go L. Valdarrama e	del Pino			
		(Contact Person)			
TIDEI	ILY LLC.				
		(Firm/Company)			
9155 1	Dupont PI				
	-	(Address)			
Wellir	ngton, FL. 33414				
	((City, State and Zip Code)			
sypino	@gmail.com				
E-1	mail Address: (to b	e used for future annual re	port notifications)		
For fu	urther informati	on concerning this ma	tter, please call:		
Santia	go L. Valdarrama d	del Pino	_at (<u></u>	383-0	021
	(Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
		or the following amou a bank located in the	•	rocess	sed by this office must be payable in US
(\$25 fd & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing and Certified Copy		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	EET ADDRES	S:			ADDRESS:
	Filing Section	iona	New Fil	_	
	ion of Corporat on Building	ions	Division P. O. Be		orporations 27
	Executive Cent	er Circle			F1. 32314

Tallahassee, FL 32301

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.

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
03/07/2017 on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: TIDEILY 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 2	day of January	20 <u>18</u>
Signature of	Authorized Representative of Lir	
Signature of	Authorized Representative:	Cultumo.
	Santiago L. Valdarrama del Pino	
Timed Ivanie		
Signature(s)	on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:		
Printed Name	:	Title:
Signature		
Printed Name	· · · · · · · · · · · · · · · · · · ·	Title:
	·	
Signature:		Title:
Printed Name	;	Title:
Signature:		
Printed Name		Title:
Timed Tume		
Signature:		
Printed Name	::	Title:
Signature:		Title:
Filmed Name	·	Title.
_	Chairman, Vice Chairman, Director, o	
H Directors o	r Officers have not been selected, an I	ncorporator must sign.
	eneral Partnership or Limited Liabi one General Partner.	lity Partnership:
Signature or c	one General Farther.	
	mited Partnership or Limited Liabi ALL General Partners.	
All others:		
Signature of a	in authorized person.	
Fees:		
Artial	les of Conversion:	\$25.00
	les of Conversion: for Florida Articles of Organization:	\$25.00 \$125.00
	ied Copy:	\$125,00 \$30.00 (Optional)
	icate of Status:	\$5.00 (Optional)
Crui	ivace of outpo,	ψοίου (Obtionar)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TIDEILY LLC.		
(8	fust contain the words "Limited Li	bility Company, "L.L.C.," or "Ll.C.")
ARTICLE II - A	ddress:	
		principal office of the Limited Liability Company
Principal Office	Addroses	Mailing Address:
Tincipal Office	Address.	Maning Address.
9155 Dupont Pl		9155 Dupont Pl
111 111 121 121 120 1	1.4	Wellington, FL, 33414
Wellington, Fl., 334		
ARTICLE III - I	Registered Agent, Registe	red Office, & Registered Agent's Signature:
ARTICLE III - I (The Limited Liability) business entity with an	Registered Agent, Registe	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
ARTICLE III - I (The Limited Liability) business entity with an	Registered Agent, Registe Company cannot serve as its own For active Florida registration.) Florida street address of t Santiago L. Valdarrama del l	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
ARTICLE III - I (The Limited Liability) business entity with an	Registered Agent, Registered Agent, Registered Agent, Register Company cannot serve as its own For active Florida registration.) Florida street address of the Santiago L. Valdarrama del N	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
ARTICLE III - I (The Limited Liability) business entity with an	Registered Agent, Registe Company cannot serve as its own F n active Florida registration.) Florida street address of t Santiago L. Valdarrama del 1 N 9155 Dupont Pl	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
ARTICLE III - I (The Limited Liability) business entity with an	Registered Agent, Registe Company cannot serve as its own F n active Florida registration.) Florida street address of t Santiago L. Valdarrama del 1 N 9155 Dupont Pl	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are: ino
ARTICLE III - I (The Limited Liability) business entity with an	Registered Agent, Registe Company cannot serve as its own F n active Florida registration.) Florida street address of t Santiago L. Valdarrama del I N 9155 Dupont Pl Florida street address (red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are: ino nme P.O. Box NOT acceptable)

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

"MGR" = Manager MGR Santiago L. Valdarrama del Pino 9155 Dupont Pl Wellington, FL, 33414 (Use attachment if necessary) ARTICLE V: Other provisions, if any.		Name and Address:	<u>Title:</u> "AMBR" = Authorized Member
(Use attachment if necessary) ARTICLE V: Other provisions, if any.			"MGR" = Manager
(Use attachment if necessary) ARTICLE V: Other provisions. if any.		Santiago L. Valdarrama del Pino	MGR
(Use attachment if necessary) ARTICLE V: Other provisions, if any.			
ARTICLE V: Other provisions, if any.		Wellington, FL. 33414	
ARTICLE V: Other provisions, if any.			
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RTICLE V: Other provisions, if any.			(Use attachment if necessary)
			(**************************************
			RTICLE V: Other provisions, if any.
REQUIRED SIGNATURE:			μοτιονομία, το α τιστο
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE:			11
REQUIRED SIGNATURE:			
			REQUIRED SIGNATURE: /
		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	TEST STORY
\ lullunua.		at human	
Signature of a member or an authorized representative of a me		an authorized representative of a member	Signature of a member
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.	CHIUCI Clamawara that	with section 605 0203 (1) (b) Florida Statutas Lam	This document is executed in accord-

Santiago L. Valdarrama del Pino 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)