L180000 37832

(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>

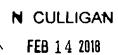




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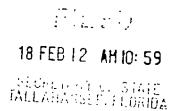


COVER LETTER

то:	New Filing So Division of C					
SHR	FCT, EL PAPE	R RECYCLING, LLC				
() () ()		R RECYCLING, LLC (Name of Res	sulting Florida Limite	d Con	mpany)	
					nd fees are submitted to convert an "Oth accordance with s. 605.1045, F.S.	ct
Please	e return all corre	espondence concernin	g this matter to:			
MINE	RY GRAVERAN					
		(Contact Person)				
EL PA	PER RECYCLIN	G, LLC				
		(Firm/Company)	•			
87 EA	ST 64 STREET					
		(Address)				
HIAL	EAH, FL 33013					
	((City, State and Zip Code)				
	89@gmail.com					
H-1	nail Address: (to b	e used for future annual re	port notifications)			
For fi	irther information	on concerning this ma	tter, please call:			
MINE	RY GRAVERAN		786 .	304-3	3646	
	(Name of Conta	ct Person)	(Area Code)	(Day	3646 ytime Telephone Number)	
		or the following amou a bank located in the		ocess	sed by this office must be payable in US	;
(\$25 fc & \$12:	i0.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	
New Divis Clifto	EET ADDRESS Filing Section ion of Corporat in Building Executive Cent	ions	New Fil Division P. O. Bo	ling S n of C ox 63:	Corporations	

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: EL PAPER RECYCLE, INC
(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)
on 02/11/2015 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: EL PAPER RECYCLING , LEC
(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 08 day of FEBRUARY	20_18
Signature of Authorized Representative of	Limited Liability Company:
Signature of Authorized Representative: Printed Name: OSMEL GONZALEZ	
Printed Name; OSMEL GONZALEZ	Title: MEMBER
Signature(s) on behalf of Other Business Ent	itv: [See below for required signature(s)]
Signature: Printed Name: OSMEL GONZALEZ	
Printed Name: OSMEL GONZALEZ	Title: PRESIDENT
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Timed Name.	
If Florida Corporation:	o contract
Signature of Chairman, Vice Chairman, Director of Directors or Officers have not been selected.	
	•
If Florida General Partnership or Limited L. Signature of one General Partner.	<u>iability Partnership:</u>
Signature of one General Latinet.	
If Florida Limited Partnership or Limited Li Signatures of <u>ALL</u> General Partners.	ability Limited Partnership:
All others: Signature of an authorized person.	
2.5	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organizati	
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Certificate of Status.	סט.כ¢ (Optionar)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

EL PAPER RECYC	CUNC IIC		
		bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - A		principal office of the Limited L	liability Company is:
Principal Office	e Address:	Mailing Address:	
OSMEL GONZAL	EZ	87 EAST 64 STREET	
		HIALEAH, FLORIDA 33013	
(The Limited Liability	y Company cannot serve as its own Re	red Office, & Registered Agent	
(The Limited Liability business entity with		egistered Agent. You must designate an indi	vidual or another
(The Limited Liability business entity with	y Company cannot serve as its own Re an active Florida registration.) ne Florida street address of the	egistered Agent. You must designate an indi	vidual or another
(The Limited Liability business entity with	y Company cannot serve as its own Re an active Florida registration.) ne Florida street address of the	egistered Agent. You must designate an indi	vidual or another
(The Limited Liability business entity with	y Company cannot serve as its own Rean active Florida registration.) The Florida street address of the MINERY GRAVERAN No. 87 EAST 64 STREET	egistered Agent. You must designate an indi	vidual or another
(The Limited Liability business entity with	y Company cannot serve as its own Rean active Florida registration.) The Florida street address of the MINERY GRAVERAN No. 87 EAST 64 STREET	egistered Agent. You must designate an indi ne registered agent are:	vidual or another

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>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	OSMEL GONZALEZ
	87 EAST 64 STREET
	HIALEAH, FLORIDA 33013
	74.
	190 E
	<u></u>
(Use attachment if necessary)	######################################
(Ose attachment if necessary)	
LE V: Other provisions, if any.	
REOUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, I am aware
Signature of a member or This document is executed in accordance any false information submitted in a document	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware ment to the Department of State constitutes a third degree for

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

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

ARTICLE IV-