# U800083910

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(⊅∞	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





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#### **COVER LETTER**

	New Filing Sec Division of Co			
SUBJE			1 NW	210
30000	C1		ulting Florida Limited Con	ppany)
The end Busines	losed Articles is Entity" into	of Conversion, Articl a "Florida Limited Li	es of Organization, an ability Company" in a	d fees are submitted to convert an "Othe coordance with s. 605,1045, F.S.
Please r	etum all corre	spondence concerning	g this matter to:	
K	and Pe	(Contact Person)		
	2121	NW LCC (Firm/Company)		
		(Address)		
		fity, State and Zip Code)		
Fa u	ul Address: (to be	miami tropica	port notifications)	
For fun	ther informatio	on concerning this ma	tter, please call;	:
Rai	18010	11	at (305) 6 (Area Code) (Day	35-2444
	(Name of Conta	ct Person)	(Area Code) (Day	rtime Telephone Number)
Enclose dollars	ed is a check fo and drawn on	or the following amou a bank located in the	int: (All checks proces United States)	sed by this office must be payable in US
(\$25 for	.00 Filing Fees Conversion for Articles uzation)	□\$155.00 Filing Fees and Certificate of Status	\$180,00 Filing Fees and Certified Copy	S185.00 Filing Fees, Certified Copy, and Certificate of Status
STRE	ET ADDRESS	S:	MAILING A	, t
	ling Section		New Filing S	1 0
	n of Corporati	ons	Division of C	
	Building		P. O. Box 63	
	xecutive Centerssee, FL 3230		Tallahassee.	FL 52514

INHS11 (7/17)

# 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:  2121 NW Fig.  (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on 02/05/2-018 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
2121 NW 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.

	1	!
·		
- na 6	112	
Signed this 30 day of March	_ 20/ \\$	
Signature of Authorized Representative of Limit	ed Liability Compa	ny:
Signature of Authorized Representative:	Title: Punsel	President
	<b>,</b>	
Signature(s) on behalf of Other Business Entity: [	See below for requir	ed signature(s)
Signature		: _ <del>-</del>
Signature Polo Jr	_Title:	(Presiden
180		I
Signature: Okga Folo.  Printed Name: Okga Folo.	Title: Vice	President
,		1
Signature: Printed Name:	Title	
Printed Name.		
Signature:	Title:	<u> </u>
Trinca Trans.		
Signature:Printed Name:		<u> </u>
Printed Name:	Title:	<del> </del>
Signature:		
Printed Name:	Title:	1
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Director, or	Officer.	
If Directors or Officers have not been selected, an Inc	corporator must sign.	1
If Florida General Partnership or Limited Liabili	ty Partnership:	,
Signature of one General Partner.		i
If Florida Limited Partnership or Limited Liabili	ty Limited Partnersl	1 ip:
Signatures of ALL General Partners.		
All others:		
Signature of an authorized person.		
-		
<u>Fces:</u>		
Articles of Conversion:	\$25.00	
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Ontional)	1
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)	
Certificate of Status.	ωσ.σσ (Optional)	<b>\</b>

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
2/2/ NW LLC (Must contain the words "Limited Liability Company, "L.L.	C.," or "Li.C.")
ARTICLE 11 - Address: The mailing address and street address of the principal office	
Principal Office Address: Mailing Ad	ldress:
2121 NW 24 Ave 2 Miami Fl 33147 Mi	121 NW 24 Ave
ARTICLE III - Registered Agent, Registered Office, & R (The Limited Liability Company cannot serve as its own Registered Agent. You business entity with an active Florida registration.)	egistered Agent's Signature:
The name and the Florida street address of the registered age	ne are:
Raul Polo Tr	
Name	
2121 NW 24 AV	e
Florida street address (P.O. Box NOT a	
Miami FL.	38 <u>1030</u>
City	Zip
Having been named as registered agent and to accept service liability company at the place designated in this certificative registered agent and agree to act in this capacity. I further a statutes relating to the proper and complete performance accept the obligations of my position as registered agent	te. I hereby accept the appointment as agree to comply with the provisions of all of my duties, and I am familiar with and as provided for in Chapter 605, F.S
Registered Agerti's Signature (REQU	JIRÉD)
(CONTINUED)	

	<b>b</b> y   <b>b d d m m m</b>
<u>l'itle:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	Haul Polo Ir
MOL	2/2/ NW ZY Ave
	Miami F1 33142
	2 2
AMBR	Olya Tolo
	2121 NW 24 Ave
	MIGINI F1 3314
<del></del>	
(Use attachment if necessary)	
(Ose ataleiment is insecting,	
LE V: Other provisions, if any.	
DECLUDED SIGNATURE.	
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member
This document is executed in accordance	e with section 605,0203 (1) (b)! Florida Statutes, I am aware
<ul> <li>any talse information submitted in a docu</li> </ul>	iment to the Department of State constitutes a third degree for
as provided for in s.817.155, F.S.	$\supset I \supset I$
Kaul 1	oped or printed name of signee
T	vped or printed name of signee
- · · · · · · · · · · · · · · · · · · ·	Filing Fees

ARTICLE IV-