11800008688

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





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APR 11 2018 T SCHROEDER

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 "Oth Prestige Security Solutions	er Business Enti	ity" immediatel	y prior to the filin	g of the Arti	cles of Conve	ersion is:
	(Enter Nan	ne of Other Busine	ss Entity)			
2. The "Other Business I (Enter entity ty		<u>General</u> poration, limited pa	Partnership, general par	tnership, com	non law or busi	ness trust, etc.)
First organized, formed of	or incorporated t	under the laws o	Florida f Enter state, or if a nor	n-U.S. entity, t	he name of the o	country)
06/01/2017 on						
(date of organization, form	nation or incorpora	ution)				
3. The name of the Flori- Prestige Security Solutions LI		oility Company	as set forth in the	attached Ar	ticles of Org	anization:
(Enter Name of Flor	rida Limited Liabil	lity Company)		•	
4. If not effective on the (The effective date: Can the date this document Note: If the date inserted in the date	not be prior to is filed by the F nis block does not r	date of receipt Florida Depart meet the applicable	t or filed date nor ment of State.)			•
document's effective date on t	he Department of S	State's records.				
5. The plan of conversion	has been appro	oved in accordar	ice with all applic	able statutes		
6. The "Converted or Othe which such members an	er Business Entit re entitled under	y" has agreed to ss. 605.1006 and	pay any members d 605.1061-605.10	having appra 72. F.S.	aisal rights the APR 10 AM	amount to

Signed this 16 day of March 2018	
Signature of Authorized Representative of Limited Lia	pility Company:
Signature of Authorized Representative:	D-mid-mi
Printed Name: Yunaykel Clark Fitle:	President
Signature(s) on behalf of Other Business Entity: See belo	ow for required signaturc(s)]
Signature:	
Printed Name: Yunaykel Clark Title:	President
Printed Name: Yunaykel Clark Title: Signature:	
Signature: Printed Name: Frank M Galvez Casanova Title:	Vice-President
Timed Name, Frank W Galvez Casanova Time.	vice-i resident
Signature:	
Printed Name: Title:	
	-
Signature:	
Printed Name: Title:	
Signature:	
Printed Name: Title:	
Signature:	
Printed Name: Title:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or Officer.	
If Directors or Officers have not been selected, an Incorporate	or must sign.
If Florida General Partnership or Limited Liability Partn	archin:
Signature of one General Partner.	ersinp.
and the second control of the second control	
If Florida Limited Partnership or Limited Liability Limit	ed Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	<u>, i</u>
1 CCS.	,,

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Articles of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Organization:

8 APR 10 AM 9: 23

. ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nat The name of the L		ity Company is:					
The name of the E	iiiiited Liabii	ity Company is.					
Prestige Security Solu	itions LLC						
		ords "Limited Liabili	y Company, "L.L.C.," or "I	.l.C.")		_	
ARTICLE II - A	ddress:						
The mailing addre	ss and street	address of the pi	rincipal office of the	Limited I	Liability	Com	pany is:
Principal Office	Address:		Mailing Address:				
3951 NW 1 Street			3951 NW 1 Street				
Miami, FL 33126			Miami, FL 33126				
					_		
(The Limited Liability C business entity with an	Company cannot s active Florida reg	erve as its own Regis gistration.)	I Office, & Register tered Agent. You must design tered agent are:	ed Agent gnate an indi	's Sign: vidual or a	ature: mother	:
	Yunaykel Cla	rk Nami	<u> </u>				
		Nam	C				
	3951 NW 1 S						
	Florida str	eet address (P.O	. Box NOT acceptab	ile)			
	Miami		FL 33126				
		City	Zip				
liability comp registered agent statutes relatin	oany at the plo and agree to g to the prope bligations of n	ace designated in act in this capacer and complete property position as reg	o accept service of prost this certificate, I hereity. I further agree to performance of my dugistered agent as prostature (REQUIRED)	eby accep comply v ties, and	nt the ap _l vith the j I am fan	pointr provis viliar	nent as sions of all with and

ART	ICL	Æ	IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Yunaykel Clark	
	3951 NW 1 Street	
	Miami, FL 33126	
MGR	Frank M Galvez Casanova	
	3951 NW 1 Street	
	Miami FL 33126	
		老少二二
		APR
412		
(Use attachment if necessary)		
		مستعدد عدد رسد مهد براه
ICLE V: Other provisions, if any.		္တိုန္တိုင္သာ
		は続う
		## CO

REQUIRED SIGNATURE:

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.

Yunaykel Clark

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)