118000089211

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(2
(Document Number)
0.85-10-1
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900310429079

03/14/18--01021--020 **180.00

18 APR | 2 AM | 10: 09

T SCHROEDER

COVER LETTER

.

то:	Registration S Division of C					
SUR.	JECT: CVAG H	OLDINGS, LLC				
302		(Name	of Resulting Florida	Limite	ed Company)	
					nd fees are submitted to convert an ecordance with s. 605.1045, F.S.	"Other
Pleas	e return all corr	espondence concernin	g this matter to:			
STU	ART R. MORRIS, I	ESQ.				
		(Contact Person)				
MOR	RIS LAW GROUP	•				
		(Firm/Company)				
7284	W. PALMETTO P	ARK ROAD, SUITE 101				
	<u> </u>	(Address)				
BOC	A RATON, FL 334	33				
	((City, State and Zip Code)				
SMO	RRIS@LAW-MOF	RRIS.COM				
E-	mail Address: (to b	e used for future annual re	port notifications)			
For f	urther informati	on concerning this ma	tter, please call:			
STU/	ART R. MORRIS, I	ESQ.	_at ()	750-3	3850	
	(Name of Conta	ict Person)	(Area Code)	(Day	ytime Telephone Number)	
Enclo	osed is a check f	or the following amou	nt:			
(\$25 f & \$12	50.00 Filing Fees or Conversion 5 for Articles panization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	EET ADDRES	S:			ADDRESS:	
_	stration Section	•	Registra			
	sion of Corporat on Building	ions	Divisior P. O. Bo		Corporations 27	
	Executive Cent	er Circle			FL 32314	

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

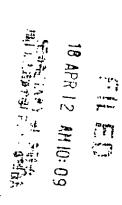
Into

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.

	ss Entity" immediately prior to the filing of the Articles of Conversion is: o - 56195 ter Name of Other Business Entity)	
2. The "Other Business Entity" is:		
(date of organization, formation or inc	(Enter state, or if a non-U.S. entity, the name of the country) corporation) d Liability Company as set forth in the attached Articles of Organization	1:
(Enter Name	of Florida Limited Liability Company)	
(The effective date: 1) cannot be date this document is filed by the date listed in the attached Article	prior to date of receipt or filed date nor more than 90 days after the Florida Department of State; AND 2) must be the same as the effectives of Organization, if an effective date is listed therein.) es not meet the applicable statutory filing requirements, this date will not be listed as the tent of State's records.	

Page 1 of 2



Signed this 13 day of Mach	20_\\\
Signature of Authorized Representative of Limits	ed Liability Company:
Signature of Authorized Representative: Printed Name: LAZARO OSCAR CALERO	Title: MANAGER
Signature(s) on behalf of Other Business Entity: [S	See below for required signature(s)
Signature: Printed Name: LAZARO OSCAR CALERO	Title: PRESIDENT
Signature:Printed Name:	_Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liability Signature of one General Partner.	Officer. corporator must sign.
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

Page 2 of 2

18 APR 12 AH 10: 09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	vis:	
CVAG HOLDINGS, LLC	iability Company, "L.L.C.," or "LLC.	<u> </u>
(Must end with the words) Entineed F	maining Company: Observed	•
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Lim	ited Liability Company is:
Principal Office Address:	Mailing Address:	
4454 CAMBRIDGE STREET	4454 CAMBRIDGE STRI	EET
LAKE WORTH, FL 33461	LAKE WORTH, FL 3346	<u> </u>
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	Registered Agent. Tou make designate	an individual or another
LAZARO OSCAR CALEF		-
1	Name	
44554 CAMBRIDGE STR	EET	_
Florida street address	(P.O. Box NOT acceptable)	
LAKE WORTH	FL 33461	_
City	Zip	
Having been named as registered agent liability company at the place designate registered agent and agree to act in this contact in the statutes relating to the proper and compact accept the obligations of my position	ned in this certificate, I hereby capacity. I further agree to conclete performance of my dutien as registered agent as provide	niccept the appointment as omply with the provisions of all s and I am familiar with and
Registered Agent	s Signature (RÉQUIRED)	Sign Co
(CO	NTINUED)	APR I
.P	age ! of 2	2 MIO: 09

and the second s	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	LAZARO OSCAR CALERO
MGR	4454 CAMBRIDGE STREET
	LAKE WORTH, FL 33461
	EARL WORTH, 1000 to.
	R. 0
	90 T 10
	0.00
 	一 。
fective date is listed, the date mus	he date of filing: (OPTIONAL the specific and cannot be more than five business da
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) The date inserted in this block does not meen in the Department of States.	et the applicable statutory filing requirements, this date will not be lis
LE V: Effective date, if other than the fective date is listed, the date mus days after the date of filing.) The date inserted in this block does not mee	et the applicable statutory filing requirements, this date will not be lis
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) The date inserted in this block does not meen in the Department of States.	et the applicable statutory filing requirements, this date will not be lis
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) The date inserted in this block does not meen in the Department of States.	et the applicable statutory filing requirements, this date will not be lis
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) The date inserted in this block does not meen in the Department of States.	et the applicable statutory filing requirements, this date will not be lis
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) he date inserted in this block does not mee is effective date on the Department of State LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membrate that any false info	et the applicable statutory filing requirements, this date will not be liste's records.
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) he date inserted in this block does not mee is effective date on the Department of State LE VI: Other provisions, if any. Signature of a membration of the department is executed in I am aware that any false inforcement is a third degree felo LAZARO OSCAR CAL	et the applicable statutory filing requirements, this date will not be list e's records. Der or an authorized representative of a member. Accordance with section 605.0203 (1) (b). Florida Statutes. Trimation submitted in a document to the Department of State my as provided for in s.817.155, F.S.

Page 2 of 2.

\$ 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-