L180001417S

(Re	equestor's Name)			
(Ad	ddress)	- 		
(Ac	ddress)			
(Ci	ity/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL.		
(Bo	usiness Entity Name)		
(Document Number)				
Certified Copies	Certificates o	of Status		
Special Instructions to Filing Officer:				





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SCORETARY OF STATE
FALL AHASSEF, FLORIDA

JUL 09 2018 T SCHROEDER

COVER LETTER

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Division of C					
SUBJECT: SUNSV	CLLC				
50Bit2C1	(Name of Res	ultinį	g Florida Limite	d Com	ipany)
					d fees are submitted to convert an "Other reordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g thi	s matter to:		
	RAFAEL H FORERO				
	(Contact Person)				
	MANAGER				
	(Firm/Company)				
8104 \	W SAMPLE RD APT 137				
	(Address)				
CORA	AL SPRINGS FL 33065				
((City, State and Zip Code)				
i	nfo@hispanusa.com				
E-mail Address: (to b	e used for future annual rej	orti	otifications)		
For further informati	on concerning this mat	ter.	please call:		
RAFAEL H FORERO		at	(954	980-9	641
(Name of Conta	ict Person)		(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the			ocess	ed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Fiting Fees and Certificate of Status		\$180.00 Filing I I Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:		MAILI	NG A	DDRESS:
New Filing Section			New Fil	_	
Division of Corporat Clifton Building	ions		Divisior P. O. Bo		orporations 27
2661 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 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: SUNSVC INC SUNSVC INC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fii	rst organized, formed or incorporated under the laws of
	(Enter state, or if a non-U.S, entity, the name of the country)
on	06/10/2015
OIL	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
	SUNSVC LLC
	(Enter Name of Florida Limited Liability Company)
4.	If not effective on the date of filing, enter the effective date: 06/01/2018
	he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
	e date this document is filed by the Florida Department of State.)
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the current's effective date on the Department of State's records.
5.	The plan of conversion has been approved in accordance with all applicable statutes.
	The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to



Signed this 15 day of JUNE	20_18			
Signature of Authorized Representative of Limit	ed Liability Company:			
Signature of Authorized Representative: Printed Name: RAFAEL H FORERO	Title: MANAGER			
Signature(s) on behalf of Other Business Entity: [S				
Signature: Printed Name: RAFAEL H FORERO	Title: PRESIDENT			
Signature: Printed Name:	Title:			
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 Incorporator must sign.				
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.				
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.				
All others: Signature of an authorized person.				
Fees:				

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Articles of Conversion:

Certificate of Status:

Certified Copy:

Fees for Florida Articles of Organization:

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SECRETARY OF STATE
LI WHASSEE, FI DONE

ARTICLES OF ORGANIZATION FOR F ARTICLE 1 - Name:		LIMITED LIA	BILITY COMPAINT	
The name of the Limited Liability Company is	S:			
SUN:	SVC LLC			
(Must contain the words "Limited Liabi		, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the particle.	principal c	ffice of the Limite	ed Liability Company is:	
Principal Office Address:	<u>Mailii</u>	ig Address:		
8404 W SAMPLE RD APT 137 CORAL SPRINGS FL 33065		8404 W SAMPLE RD APT 137 CORAL SPRINGS FL 33065		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	ed Office,	& Registered Ag . You must designate ar	gent's Signature: a individual or another	
The name and the Florida street address of the	registere	l agent are:		
RAFAEL	H FORER	0		
Nar	ne			
8404 W SAM				
Florida street address (P.	O. Box <u>N</u> 0	OT acceptable)		
CORAL SPRINGS	FL			
City		Zip		
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as r	in this cer acity. I fun e performa registered (tificate, I hereby as ther agree to comp nce of my duties, o tyent as provided j	ecept the appointment as ply with the provisions of all and I am familiar with and	
Registered Agent's Si		EQUIRED)	FILE 18 JUL -5 AI SECRLIARY OF TALLAHASSEE, F	

ARTICLE IV-

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

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MANAGER	RAFAEL H FORERO		
	8404 W SAMPLE RD APT 137		
	CORAL SPRINGS FL 33065		
AMBR	JUAN PABLO FORERO		
	8404 W SAMPLE RD APT 137		
	CORAL SPRINGS FL 33065		
			
		_ 	
(Use attachment if necessary)		18 SE	
(Ose attachment if necessary)		L ORE:	
ARTICLE V: Other provisions, if any.		388 488 -2	1
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		<u></u>	—
REQUIRED SIGNATURE:		0A 	
	11/11/		
×			
This document is executed in accordance	an authorized representative of a newith section 605.0203 (1) (b). Florida Statut ment to the Department of State constitutes a	es. I am aware that	;
	RAFAEL H FORERO		
Tv	ned 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)