# L18000173872

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Caemeer Line)
(Document Number)
(Boodine Namber)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

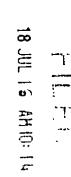
Office Use Only

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W14-51473

### **COVER LETTER**

TO: New Filing Sect Division of Con				
<b>/</b>	ATIVE Wa	alting Florida Limited Com	<del></del>	-
The enclosed Articles of Business Entity" into a				
Creative  555 Con  ADOPKA	condence concerning  (Contact Person)  (Firm/Company)  (Address)  (Address)  (State and Zip Code)	this matter to:  2CA  LLC  2712		18 JUL 16 AK 10: 14
Karamato E-mail Address: (to be u	ne @ GMC	ort notifications)		
For further information (Name of Contact	Hurreca	at (539) 8	232 <i>05</i> 06 time Telephone Number)	_
Enclosed is a check for dollars and drawn on a	_		sed by this office must b	pe payable in US
•	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filing Section Division of Corporation Clifton Building	ns	MAILING A New Filing S Division of C P. O. Box 633	ection Corporations	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

### **Articles of Conversion**

For

# "Other Business Entity"

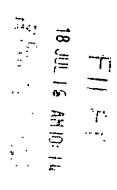
Into

# 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of <u>Texas</u> (Enter state, or if a non-U.S. entity, the name of the country)
on <u>uuq 08, 2017</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
TWO BOYS STUCCO, LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: July 16, 2018 (The effective date: Cannot be prior to date of receipt or filed date not more than 90 calendar days after the date this document is filed by the Florida Départment 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 12th day of Tuly 20_18.
Signature of Authorized Representative of Limited Liability Company:
Signature of Authorized Representative:  Printed Name: Hejandro free Title: Owner
Signature(s) on bahalf of Other Business Entity: [See below for required signature(s)]
Signature: Aliandis Hurrers Title: Owner
Signature:
Printed Name: Title:
Signature:
Signature: Title:
Signature: Title:
Signature: 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:

Fees for Florida Articles of Organization: Certified Copy: BJULIS AHIO: I

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Lia	ibility Company is:			
Two I	SOUS STUCE	o, 200		<del></del>
ARTICLE II - Address:				
The mailing address and stre	et address of the principal off	fice of the Limited Liab	pility Company is:	
<u>Prii</u>	ncipal Office Address:		Mailing Address:	
555 Co Apoc K 33 715	A FL		OPEA FL	
(The Limited Liability Comp	Agent, Registered Office, & pany cannot serve as its own Figure an active Florida registration	Registered Agent, You	Signature: must designate an individual or	18 JU
The name and the Florida st		Name ONUIE (P.O. Box NOT accep	18 18 C. A 57 table) 32712	LIS AMIO: IL
	City	State	Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of psy position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

### ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
<del> </del>	
	<u> </u>
	30
	PH IO:
<del></del>	
(Use attachment if necessary)	
CFICLE V: Effective date, if other than the date of	of filing: (OPTIONAL)
an effective date is listed, the date must be spece date of filing.)	cific and cannot be more than five business days prior to or 90 days aft eet the applicable statutory filing requirements, this date will not be listed
an effective date is listed, the date must be spece edate of filing.) ote: If the date inserted in this block does not me	cific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed
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an effective date is listed, the date must be spece date of filing.)  ote: If the date inserted in this block does not me e document's effective date on the Department of CTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a mer This document is executed.	eet the applicable statutory filing requirements, this date will not be listed f State's records.  Does or an authorized representative of a member, d in accordance with section 605.0203 (1) (b), Florida Statutes.
an effective date is listed, the date must be spece date of filing.)  ote: If the date inserted in this block does not me e document's effective date on the Department of CTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a mer This document is executed an aware that any false.	poer or an authorized representative of a member. d in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State
an effective date is listed, the date must be spece date of filing.)  ote: If the date inserted in this block does not me e document's effective date on the Department of CTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a mer This document is executed an aware that any false.	poer or an authorized representative of a member. d in accordance with section 605.0203 (1) (b), Florida Statutes.

# 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)