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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SELREJARY OF STATE
TALL AHASSEE, FLORIDA

JUL 2 0 2018 T SCHROEDER

COVER LETTER

TO:	New Filing Se Division of Co				
SHRII	ECT. ATELIER	ARRECHEA LLC			
20091		(Name of Res	ulting Florida Limi	ed Com	pany)
					d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	return all corre	spondence concerning	g this matter to:		
JUAN A	A FIGUEROA				
		(Contact Person)	-	•	
JUAN .	A FIGUEROA PA	. CPA			
	-	(Firm/Company)		•	
1428 B	RICKELL AVEN	UE STE 206			
	, <u>, , , , , , , , , , , , , , , , , , </u>	(Address)	-	•	
MIAM	I. FLORIDA 3313	1			
	(C	ity, State and Zip Code)		-	
CARM	EN@JAFCPA.CC)M			
E-m	ail Address: (to be	used for future annual re	port notifications)	-	
For fu	ther information	on concerning this ma	tter, please call:		
JUAN .	A FIGUEROA		_at (1448-5	844
	(Name of Contac	et Person)	(Area Code	(Day	time Telephone Number)
		or the following amou a bank located in the	-	rocess	ed by this office must be payable in US
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		S185.00 Filing Fees, Certified Copy, and Certificate of Status
New F Division Clifton 2661 E	ET ADDRESS filing Section on of Corporation Building Executive Center assee, FL 3230	ons er Circle	New F Divisio P. O. E	iling Son of Cox 632	orporations

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: ATELIER ARRECHEA, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
10-22-2014
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ATELIER ARRECHEA 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.

TILEU

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

Signed th	nis <u>25TH</u>	day of JUNE	20_18	
Signatui	re of Author	ized Representative of Li	mited Liability Company:	
Signature Printed N	e of Authoriz Iame: <u>ALEXA</u> I	ed Representative: NDRE ARRECHEA	Title: MGRM	
Signatur	e(s) on behal	f of Other Business Entity	ː [See below for required signa	iture(s)
Signature Printed N	e: Y Jame: <u>ALEXA</u>	NDRE ARRECHEA	Title: MGRM	
Signature Printed N	e: lame:		Title:	
Signature Printed N	e: lame:		Title:	
Signature Printed N	: lame:		Title:	
Signature Printed N	:: laine:		Title:	
Signature Printed N	e: laine:		Title:	
Signature	a Corporation of Chairman ors or Officers	n: , Vice Chairman, Director, have not been selected, an	or Officer. Incorporator must sign.	,
	a General Pa	rtnership or Limited Liab	oility Partnership:	
If Florid	a Limited Pa		oility Limited Partnership:	
All other Signature	<u>s:</u> of an authori	zed person.		
Fees:				
F C	articles of Co ces for Florid certified Copy certificate of S	la Articles of Organization ::	\$25.00 a: \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

18 JUL 19 AM 9 37
SECREIARY OF STATE
ALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company i	is:				
ATELIER ARRECHEA LLC (Must contain the words "Limited Liab	ility Company, "L.L.C.," or "L.L.C.,")				
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited	l Liability Company is:			
Principal Office Address:	Mailing Address:				
990 NE 99TH STREET MIAMI SHORES, FL. 33138	1428 BRICKELL AVENUE, STE 206				
WHAMI SHORES, P.L. 33138	MIAMI, FL. 33131				
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Regional business entity with an active Florida registration.)					
The name and the Florida street address of the	e registered agent are:	,			
	CERTIFIED PUBLIC ACCOUNTA	~ /			
Na	me				
1428 BRICKELL AVENUE S					
Florida street address (F	.O. Box NOT acceptable)				
MIAMI City	FL 33131 Zip				
	•				
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as a	l in this certificate, I hereby acc acity. I further agree to comply te performance of my duties, an	ept the appointment as v with the provisions of all <u>d</u> I am familiar with and			
		18 . FALL			
Registered Agent's S	ignature (REQUIRED)	JUL 19 CRETARY			
(CONT)	INUED)	ILED 19 AM S: 37 ARY OF STATE SEE. FLORIDA			

ARTICLE 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	ALEXANDRE ARRECHEA		
	990 NE 99TH STREET		
	MIAMI SHORES, FLORIDA 33138		
MGR	MARLENE BARRIOS		
MON	990 NE 99TH STREET		
	MIAMI SHORES, FLORIDA 33138		
•			
		<u> </u>	
			•
		<u> </u>	
(Use attachment if necessary)		SS 19	,
		<u>m</u> -<	
FICLE V: Other provisions, if any.		10 N	•
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			<u> </u>
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<u>required s</u>ign∡ture:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (i) (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.

ALEXANDRE ARRECHEA

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)