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(Re	equestor's Name)		
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PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Name	e)	
(Document Number)			
Certified Copies	_ Certificates o	of Status	
Special Instructions to Filing Officer:			





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SECRETARY OF STATE
ALLIAMASSEE, FLORIDA

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#### **COVER LETTER**

Division of Corporations
SUBJECT: Fede 09, LLC (Name of Resulting Florida Limited Company)
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Harlene Zapata (Contact Person)  Gar Law (Firm/Company)
(Contact Person)
GaR Law
(Firm/Company)
999 Ponce de Leon Blud, #1135 (Address)
Coral Gables FL 33134 (City, State and Zip Code)
house Fg a a ol. com  E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Name of Contact Person)  (Name of Contact Person)  (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$\text{\$\sigma\$}\$\$\$150.00 Filing Fees (\$25 for Conversion & Status of Organization) \$\square\$

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

New Filing Section

P. O. Box 6327

STREET ADDRESS:

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

New Filing Section

Clifton Building

TO: New Filing Section

### **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:
Fede 09 LLC Mile - 2234' (Enter Name of Other Business Entity)
•
2. The "Other Business Entity" is a Limited Liability Company (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>Delawa(e</u> (Enter state, or if a non-U.S. entity, the name of the country)
on 11-10-2014 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Fede 09, 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.

Signed this 13th day of August 20	18
Signature of Authorized Representative of Limited I	iability Company:
Signature of Authorized Representative:  Printed Name: Escape Tit	e Har four
Signature(s) on behalf of Other Business Phitiy: [See ]	clow for required signature(s)}
Signature: Printed Name: Echesto Daman Tit	e: Mgr.
Signature: Printed Name:Tit	e:
Signature:	e:
Signature: Tit	e:
Signature: Tit	e:
Signature:	e:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Office If Directors or Officers have not been selected, an Incorporation	
If Florida General Partnership or Limited Liability Par Signature of one General Partner.	<b>J</b>
If Florida Limited Partnership or Limited Liability Lin Signatures of ALL General Partners.	nited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: \$25 Fees for Florida Articles of Organization: \$12.	

\$30.00 (Optional) \$5.00 (Optional)

Certified Copy: Certificate of Status: FILED

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SECRE FLORIDA
FALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Fede 09, LLC (Must contain the words "Limited Liability	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
973 SW 149 CF	973 149 Ct
Migmi FL 33194	Hiami FL 33194
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
Fabian Gener	<u>350</u>
973 SW 149	C+.
Florida street address (P.O.	
<u>Miami</u> City	FL 33194
City	Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete page 1.	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S
Gene	
Registered Agent's Signa	ature (REQUIRED)
(CONTINU	

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	Einesto Naiman 973 149 Ct Miami Fl 33194	
		, - -
		· ·
	7 S	18 AUG 17
(Use attachment if necessary)	SSEC	
ARTICLE V: Other provisions, if any.	FLORI	AHII: 16
REQUIRED SIGNATURE:	10000	
This document is executed in accordance with	authorized representative of a member h section 605.0203 (1) (b), Florida Statutes, I am aware it to the Department of State constitutes a third degree fel	hat ony
Einesto Naima	$\sim$	
Typed	or printed name of signee	•
	Filing Fees	14
\$125.00 Filing Fee for Articles of O	organization and Designation of Registered A	rgent

\$ 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-

Company: