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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
		
Special Instructions to	Filing Officer:	

Office Use Only



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18 AUG 17 AM II: 45 SECRETARY OF STATE TALL SHASSEE, FLORIDA

AUG 2 0 2018 T SCHROEDER

COVER LETTER

Division of Corporations		
SUBJECT: Onyx Condo	LLC sulting Florida Limited Con	npany)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li	les of Organization, an	d fees are submitted to convert an "Other
Please return all correspondence concerning	g this matter to:	
Harlene Zapata (Contact Person) Gonzalez a Rodinguez PL (Firm/Company)		
_		
999 Ponce de Leon Blud +	1135	
Grad Gables FL 33134 (City, State and Zip Code)		
E-will Address: (to be used for future annual rep		
For further information concerning this mat	ter, please call:	
Harlene Zapata (Name of Contact Person)	at (<u>305</u>) <u>46</u> (Area Code) (Day	time Telephone Number)
Enclosed is a check for the following amoundollars and drawn on a bank located in the U	nt: (All checks process	,
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\square{1}\$\$155.00 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 Corporations Clifton Building	MAILING A New Filing Se Division of C P. O. Box 632	ection orporations
2661 Executive Center Circle	Tallahassee, F	FL 32314

INHS11 (7/17)

Tallahassee, FL 32301

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: Onex Condo LLC Mule-3390 (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>Delawate</u> (Enter state, or if a non-U.S. entity, the name of the country)
on 10-22-2013 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Ony x Condo 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 13 day of August	20_13	
or a standard Decreeontotive of Limit	ted Lightlify Company:	
Signature of Authorized Representative: Printed Name: JUNI JOSE Representative:	for Cenore	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)	
Signature: Hortenia Rodrigues Printed Name: Hortenia Rodrigues	TRIe: Har.	
Signature:	Titiz:	
Printed Name:		
Signature:		
Printed Name:	_ Tide:	
Signature:		
Printed Name:	Title:	
	-	
Signature:	erri d	
Printed Name:	_ Hitic:	
Simpture:		
Signature:Printed Name:	Title:	
If Florida Corporation:	m mr	
Signature of Chairman, Vice Chairman, Director, or Off Directors or Officers have not been selected, an Inc	Officer.	
if Directors of Officers have not been selected, an inc	or portator most signi	
If Florida General Partnership or Limited Liabilit	ly Partnership:	0
Signature of one General Partner.		÷.
	ン文 エグ・パー・プロー・ファー・エク・エク・エク・エク・エク・エク・エク・エク・エク・エク・エク・エク・エク・	Ç
If Florida Limited Partnership or Limited Liabilit	y Inmited Partnership:	,
Signatures of ALL General Partners.	· · · · · · · · · · · · · · · · · · ·	?
All others: Signature of an authorized person.	ļii m	- *1
Signature of all audiotized postson.	0	_
Fees:	ਕੋੜੇ ਹਿ	>
Articles of Conversion:	\$25.00	
Fees for Florida Articles of Organization:	·	
Certified Copy:	\$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	

X

18 AUG 17 AM 11:45

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
536 Euclid Ave #3	536 Exlid Ax#3
Hiami Beach, FL 33139	Hiami Reach, FL 33139
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	
Juan Jose R Name	lebora
536 Euclid Ave.	.#3
Florida street address (P.O.	
<u>Hiami Beach</u> City	_{FL} 3313 9
City	Zip
liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regional forms.	this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and instered agent as provided for in Chapter 605, F.S
(CONTINU	TALLAHASSEE, FLORID

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Juan Jose Rebola 536 Euclid Ave #3 Migmi Brach FL 33139 Apr. 5
	ECHETARY OF STATE
(Use attachment if necessary) CLE V: Other provisions, if any.	
REQUIRED SIGNATURE: Hortensia	Roducture/ an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ument to the Department of State constitutes a third degree felony
This dominant is assented in accordance	difficult to the Debuttment of State constitutes a time debug to town)