# L1800206331

(Re	equestor's Name)	
(Ad	dress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

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### COVER LETTER

TO: New Filing	g Section F Corporations			
	- (A (NVEST	M=75 110		
OODGECT:	(Name of I	Resulting Florida Limited	Company)	<del></del>
•	les of Conversion, Art to a "Florida Limited	ticles of Organization, Liability Company" in	and fees are submitted to a accordance with s. 605.	o convert an "Other 1045, F.S.
Please return all co	rrespondence concern	ing this matter to:		
KATHY KWOK				
	(Contact Person)			
NEIL J. MORNICK, C		_		
44440 N. KENDA	(Firm/Company)			
11440 N KENDALL C				
MIAMI, FL 33176	(Address)			
(	(City, State and Zip Code)	<del></del>		
KATHY@NJMCPA.C	ОМ			
E-mail Address: (to	be used for future annual r	eport notifications)		
For further informati	ion concerning this ma	atter, please call-		
KATHY KWOK		225	-2224	
(Name of Contr	act Person)	\	sytime Telephone Number)	-
Enclosed is a check it dollars and drawn on	for the following amou	int: (All checks proces	ssed by this office must be	e payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$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	<b>18</b> ا
STREET ADDRESS New Filing Section Division of Corporati Clifton Building	ons	MAILING A New Filing S Division of C P. O. Box 63	Section Corporations	AUG 20 FX
2661 Executive Center		Tallahassee,		· · · · · · · · · · · · · · · · · · ·

#### 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.

	(Enter Name of Other Business Entity) immediately prior to the filing of the Articles of Conversion is:  (Enter Name of Other Business Entity)
2. The "Ot	ther Business Entity" is a CORPORATION
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organi	zed, formed or incorporated under the laws of FLORIDA
	(Enter state, or if a non-U.S. entity, the name of the country)
on [/11]	3 or b
(date of or	rganization, formation or incorporation)
+C/A	e of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  [NVESTMENTS, LCC  (Enter Name of Florida Limited Liability Company)
the date this	ve date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after s document is filed by the Florida Department of State.)  the inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the fective date on the Department of State's records.
5. The plan o	of conversion has been approved in accordance with all applicable statutes.
6. The "Conv	rerted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to himmembers are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.
	TO AUG 2

Signed this 2ND day of AUGUST	20_18		
Signature of Authorized Representative of L	——————————————————————————————————————		
Signature of Authorized Representative: X 1/1/Printed Name: MARIA E IGLESIAS			
Signature(s) on behalf of Other Business Entity	: [See below for required signature(s)]	,	
Signature: x //all	Title: PRESIDENT		
Signature: Printed Name:			
Signature:Printed Name:			
Signature:Printed Name:	Title:		
Signature: Printed Name:	Title:		
Signature: Printed Name:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir	065		
If Florida General Partnership or Limited Liabil Signature of one General Partner.	_		
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ity Limited Partnership:	51.1 7A1.1	<b>1</b>
All others: Signature of an authorized person.		7	AUG 23
Fees:		17	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	er	1:25

# 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"	<del></del>
ARTICLE II - Address: The mailing address and street address of the pri		y Company is:
Principal Office Address:	Mailing Address:	
401 69TH STREET, #1508 MIAMI BEACH, FL 33141	401 69TH STREET, #1508 MIAMI BEACH, FL 33141	- <del></del>
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 Sign red Agent. You must designate an individual or	ature: another
The name and the Florida street address of the re-	gistered agent are:	
MARIA E IGLESIAS		
Name		
401 69TH STREET, #1508		
Florida street address (P.O. F	Box NOT acceptable)	
MIAMI BEACH	FL 33141	
City	Zip	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per accept the obligations of my position as registered.	is certificate, I hereby accept the app. I further agree to comply with the performance of my duties, and I	pointment as Provisions of all
Registered Agent's Signatu	re (REQUIRED)	18 AUG
(CONTINUE	(D)	28 PH

#### ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager MGR	MARIA E IGLESIAS 401 69TH STREET, #1508 MIAMI BEACH, FL 33141	<del></del>	
(Use attachment if necessary)		AUG 28	
ARTICLE V: Other provisions, if any.		ਜ਼ ::: ::: ::: ::: ::: ::: ::: ::: ::: :	; <u>;</u>
REQUIRED SIGNATURE:  Signature of a member or an This document is executed in accordance wi any false information submitted in a document as provided for in s.817.155, F.S.	authorized representative of a member th section 605.0203 (1) (b), Florida Statutes. I am aw not to the Department of State constitutes a third degree	rare that	

MARIA E IGLESIAS

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)