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(Requestor's Name)		
(Address)		
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	tate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nan	ne)
(Docur	nent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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COVER LETTER

SUBJECT: Blue Shark Restoration LC (Name of Resulting Florida Limited Company)				
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.				
Please return all correspondence concerning this matter to:				
Lourdes A. Vazguez				
Blue Snanc Restoration UC (Firm/Company)				
3153 Sw 58th place				
Pt. Lauderdale, FL 33312 (City, State and Zip Code)				
E-mail Address: (to be used for future annual report notifications)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (229) 393-3689 (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)				
\$150.00 Filing Fees (\$25 for Conversion & Status \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of \$180.00 Filing Fees and Certified Copy & Certified Copy, and Certificate of Status				
STREET ADDRESS: MAILING ADDRESS:				

New Filing Section

P. O. Box 6327

Division of Corporations

Tallahassee, FL 32314

New Filing Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

TO: New Filing Section

Division of Corporations

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:			
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a inited lability 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			
on $\frac{08 \sqrt{09 \sqrt{2018}}}{\text{(date of organization, formation or incorporation)}}$.			
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:			
Blue Shark Restoration LCC. (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 30 th day of OCtober	20			
Signature of Authorized Representative of Lim	ited Liability Company:			
Signature of Authorized Representative: Lourdes A. Vazguez	Title: CD-OWNER/Registered Agent			
Signature(s) on behalf of Other Business Entity:				
Signature: Sour A Printed Name (O(1/2005 A 1/4/2/4) & 6	22Title: CALOWNEY/ RGISTERED Agent			
S. Contraction of the Contractio	The Control of the Co			
Signature:Printed Name:				
Signature: Printed Name:	TNH			
Timed Paine.	THE.			
Signature: Printed Name:				
Printed Name:	Title:			
Signature:				
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
	SSE SSE			
If Florida Corporation:				
Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.				
	The state of the s			
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.				
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:			
All others: Signature of an authorized person.				
Fees:				
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Blue Snark Resta (Must contain the words "Limited Liability	y Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3153 SW 58th place	3153 SW 58th place
Pt. Lauderdalo, Pl 333 r	Ff Lunderdale, PC 33312
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	

The name and the Florida street address of the registered agent are:

ARTICLE I - Name:

Lourdes A. Vazquez

Name

3153 SW 58th place

Florida street address (P.O. Box NOT acceptable)

P1. Lauderdale FI. 33312

City 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 my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MC 2	Cristino Rodríguez 3153 SW 58th place Fr Junderdalo, FL 33312
MGR	Lourdes A. yarquez 3153 Sur 58th place pt. haudendale, PC 33312
	
	2018 C
(Use attachment if necessary)	FIL AHASSI
ARTICLE V: Other provisions, if any.	

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (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.

OUTORS A - Vazquez
Typed or Printed name of signee

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)