118000365071

(Re	equestor's Name)		
(Ad	Idress)		
(Ac	ldress)		
(Ci	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
		ľ	
<u> </u>		_	

Office Use Only



500320326875

11/05/18--01030--009 **150.00

TAIL SE PHIZE 0.3

NOV 16 2018 T SCHROFTER

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: Blossom LLC
(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
January 21, 2015 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Blossom Miami 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 30 day of October	20_ts
Signature of Authorized Representative of Limi	ted Lighility Company:
Signature of Authorized Representative: Printed Name: Anita Bustos	THE MUR
Signature(s) on behalf of Other Business Entity: 1	
Signature: Juita Diploy Printed Name: Arija Bustor	Title: MGR
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	_Title:
Signature:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y 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)

18 HOV IS PH 12: OL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		LITT COMPANT
The name of the Limited Liability Company	y is:	
Blossom Miami LLC		
	ability Company, "L.L.C.," or "LLC.")	
ADTICLER		
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
3118 NW 99th Place	3118 NW 99th Place	
Doral, FL 33112	Doral, FL 33112	
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of the same and the same	Registered Agent. You must designate an in-	
Enterprise Resource Plannin	ng Inc.	
<u> </u>	Vame	
1000 NW 57th Ct Suite 104	0	
	(P.O. Box NOT acceptable)	
Miami	FL 33126	
City	Zip	
	ed in this certificate, I hereby accer apacity. I further agree to comply lete performance of my duties, and	ept the appointment as with the provisions of all Ham familiar with and
		1

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

Name and Address:

(Use attachment if necessary)

"AMBR" = Authorized Member

ARTICLE V: Other provisions, if any.

ARTICLE IV-

"MGR" = Manager

Company:

Title:

MGR

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 talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.

Anita Bustos

8105/00/0<u>0</u>

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)