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(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

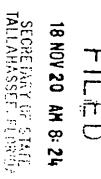
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COVER LETTER

TO:	New Filing S Division of C							
SUB.	JECT: PIENET	A. LLC						
			sulting Florida Li	mited Cor	npany)			
		s of Conversion, Artic o a "Florida Limited L						ther
Pleas	e return all corr	espondence concernin	g this matter to) :				
Jose I	M. de la O							
•	•	(Contact Person)						
AGI R	Registered Agent	s, Inc.						
		(Firm/Company)		_				
1000	Brickell Ave., Su	ite 300						
		(Address)		_				
Miami	i, FL 33131							
	(1	City, State and Zip Code)						
jose@	agi-ra.com							
E-1	nail Address: (to b	e used for future annual re	port notifications)				
For fu	ırther informati	on concerning this ma	tter, please cal	l :				
Jose I	M. de la O		at (³⁰⁵	_\ 416-ն				
	(Name of Conta	act Person)	(Area Coo	le) (Day	time Telephone Number)			
		for the following amou a bank located in the		s process	sed by this office mus	t be payab	de in I	US
(\$25 fc & \$125	60.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	■\$180.00 Fili and Certified C	_	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status			
New I Divis: Clifto	EET ADDRES Filing Section ion of Corporat in Building Executive Cent	ions	New Divis P. O.	Filing S sion of C Box 63:	lorporations	SECRETARY (TALLAHASSEE	18 NOV 20	7

Tallahassee, FL 32301

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.

o
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: PIENETA, LLC (Authorized to transact business in FL under document M12000000385)
(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 (Enter state, or if a non-U.S, entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
September 28, 2011
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PIENETA, 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.
SECRETARY LASSES FLALLAHASSES FL

Signed this 19 day of November	20 18
Signature of Authorized Representative of L	imited Kiability Company:
Signature of Authorized Representative: Printed Name: Robert R. Adams	Title: Authorized Representative
Signature(s) on behalf of Other Business Entit	v: [See below for required signature(s)]
Signature: Printed Name: Robert R. Adams	Title: Authorized Representative
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, If Directors or Officers have not been selected, an	
If Florida General Partnership or Limited Lia Signature of one General Partner.	<u>bility Partnership:</u>
If Florida Limited Partnership or Limited Lial Signatures of ALL General Partners.	bility Limited Partnership:
All others: Signature of an authorized person.	
Fees:	

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: \$125.00

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

3:	
ity Company, "L.L.C.," or "LLC.")
principal office of the Limi	ited Liability Company is:
Mailing Address:	
1800 SW 1st Avenue	
Suite 601	
Miami, FL 33129	
stered Agent. You must designate : registered agent are:	gent's Signature: an individual or another
· · · · · · · · · · · · · · · · · · ·	
ne	
O. Box NOT acceptable)	
FL 33131	
Zip	
to accept service of process in this certificate, I hereby c city. I further agree to con	s for the above stated limited accept the appointment as
	Mailing Address: 1800 SW 1st Avenue Suite 601 Miami, FL 33129 d Office, & Registered A stered Agent. You must designate a registered agent are: D. Box NOT acceptable) FL 33131 Zip To accept service of process

ARTICLE IV-

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 MGR	Jose Antonio Pietri 1800 SW 1st Ave., Suite 601 Miami, FL 33129		
			
	TALL.		
(Use attachment if necessary)	SSE STATE OF THE S		
ICLE V: Other provisions, if any.			
REQUIRED SIGNATURE:			
Signature of a member or This document is executed in accordance any false information submitted in a document	with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony		

Robert R. Adams, Authorized Representative

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)