# 118000290718

| (Re                     | questor's Name)   |              |
|-------------------------|-------------------|--------------|
| (Ad                     | dress)            |              |
| (Ad                     | dress)            | <del>_</del> |
| (Cit                    | y/State/Zip/Phone | · #)         |
| PICK-UP                 | ☐ WAIT            | MAIL         |
| (Bı                     | siness Entity Nam | ne)          |
| (Do                     | ocument Number)   |              |
| Certified Copies        | _ Certificates    | of Status    |
| Special Instructions to | Filing Officer:   |              |
|                         |                   | :            |
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SECRETARY OF STATE FALL AHASSEE. FLORIDA.

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T SCHROEDER

#### COVER LETTER

| TO: New Filing S<br>Division of O  |   |                   |                           |       |  |
|--|---|-------------------|---------------------------|-------|--|
| SUBJECT: Tienda N  | •   |                   |                           |       |  |
| 30bJEC1  | (Name of Res                                    | ulting Flor       | ida Limite                | d Con | ipany)   |
|  |   |                   | _                         |       | d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S. |
| Please return all corn   | respondence concernin                           | g this ma         | tter to:                  |       |  |
| David Diaz   |   |                   |                           |       |  |
|  | (Contact Person)                                |                   |                           |       |  |
| Tienda Nazca   |   |                   |                           |       |  |
|  | (Firm/Company)                                  |                   |                           |       |  |
| 255 East Flagler St. Suit  | e # 85  |                   |                           |       |  |
|  | (Address)                                       |                   | <del></del>               |       |  |
| Miami, FL 33131  |   |                   |                           |       |  |
|  | City, State and Zip Code)                       |                   | <del></del>               |       |  |
| tiendanazca@gmail.com  |   |                   |                           |       |  |
| E-mail Address: (10  | oe used for future annual re                    | port notific      | cations)                  |       |  |
| For further informat   | ion concerning this ma                          | tter, plea:       | se call:                  |       |  |
| David Diaz   |   | _at (             | )                         | 307-4 | 408  |
| (Name of Cont  | act Person)                                     | (Aı               | rea Code)                 | (Day  | time Telephone Number)   |
|  | for the following amound a bank located in the  |                   |                           | ocess | sed by this office must be payable in US                                   |
| ■ \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | □\$155.00 Filing Fees and Certificate of Status |                   | 00 Filing I<br>ified Copy |       | ☐S185.00 Filing Fees,<br>Certified Copy, and<br>Certificate of Status      |
| STREET ADDRES New Filing Section   |   |                   | New Fil                   | ing S |  |
| •  |   | Division P. O. Bo | n of Corporations ox 6327 |       |  |
|  |   |                   | ssee, FL 32314            |       |  |

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.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  NAZCA CORPORATION  SOPEO  |
|---|
| (Enter Name of Other Business Entity)   |
| 2. The "Other Business Entity" is a Corporation  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)  |
|   |
| First organized, formed or incorporated under the laws of Florida  (Faturettie or if a non H.S. artity the same of the country)   |
| (Enter state, or if a non-U.S. entity, the name of the country)   |
| 10/31/1990<br>on  |
| On  |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:   |
| Tienda Nazca, 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.  |
| 18 DEC 17 SECRETARY TALL ABASSA   |

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: \$125.00

Certified Copy:

Fees:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:  |   |  |
|--|---|--|
| The name of the Limited Liability Co   | mpany is:   |  |
| Tienda Nazca, LLC  |   |  |
|  | mited Liability Company, "L.L.C.," or "LLC.")   | <del> </del>   |
| ARTICLE II - Address:  |   |  |
| The mailing address and street addres  | s of the principal office of the Limit  | ed Liability Company is:   |
| Principal Office Address:  | Mailing Address:  |  |
| 255 East Flagler St.   | 255 East Flagler St   |  |
| Suite # 85   | Suite # 85  |  |
| Miami, FL 33131  | Miami, FL 33131   |  |
| David Diaz   | Name  | THE SECRETARY ALL AHASSE   |
| 255 East Flagler St. S   |   |  |
| Florida street add   | dress (P.O. Box <u>NOT</u> acceptable)  | PH 3: 08   |
| Miami  | FL 33131  |  |
| Cit  | y Zip   |  |
| liability company at the place des<br>registered agent and agree to act in<br>statutes relating to the proper and<br>accept the obligations of my pos<br>Registered Ag | gent and to accept service of process signated in this certificate, I hereby act this capacity. I further agree to compound the performance of my duties, a provided part of the signature (REQUIRED) | ecept the appointment as<br>ply with the provisions of all<br>and I am familiar with and |
| (  | CONTINUED)  |  |

#### ARTICLE IV-

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

| <u>Title:</u>                    | Name and Address:  |
|----------------------------------|--|
| "AMBR" = Authorized Member       |  |
| "MGR" = Manager                  |  |
| MGR                              | Jenny P Diaz   |
|                                  | 255 East Flagler St. Suite # 85  |
|                                  | Miami, FL <u>33131</u>   |
|                                  |  |
|                                  | <u> </u>   |
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| (Use attachment if necessary)    | - Sign - 1   |
|                                  | The state of the s |
|                                  |  |
| CLE V: Other provisions, if any. | <u>ب</u> جي  |
| ,                                |  |
|                                  | <b>3</b> 27  |
| -                                |  |

#### **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.

|   |    |    | 13 | •  |     |
|---|----|----|----|----|-----|
| J | сn | nv | ľ  | D: | 132 |

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)