# 11800191003

| (Re                     | questor's Name)   |             |
|-------------------------|-------------------|-------------|
| (Ad                     | dress)            |             |
| (Ad                     | dress)            |             |
| (Cit                    | y/State/Zip/Phone | e #)        |
| PICK-UP                 | MAIT              | MAIL        |
| (Bu                     | siness Entity Nar | ne)         |
| (Do                     | ocument Number)   |             |
| Certified Copies        | _ Certificate:    | s of Status |
| Special Instructions to | Filing Officer:   |             |
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Office Use Only

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SECRETARY OF STATE
TALLAHASSEE FLOREGO

# **COVER LETTER**

| TO:                 | New Filing S<br>Division of C                                      |                                                       |                                       |                    |                                                                         |                         |               |       |
|---------------------|--------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------|--------------------|-------------------------------------------------------------------------|-------------------------|---------------|-------|
| SUBJ                | ECT: DIAMON                                                        | D BANQUET HALL, IN                                    | С                                     |                    |                                                                         |                         |               |       |
|                     |                                                                    |                                                       | sulting Florida Limit                 | ed Cor             | npany)                                                                  | _                       |               |       |
| The e<br>Busin      | nclosed Articlesess Entity" into                                   | s of Conversion, Artic<br>a "Florida Limited Li       | les of Organizati<br>iability Company | on, ar<br>‴in a    | nd fees are submitted to accordance with s. 605.1                       | convert<br>.045, F.     | t an "C<br>S. | Other |
| Please              | e return all corr                                                  | espondence concernin                                  | g this matter to:                     |                    |                                                                         |                         |               |       |
| KARE                | LIA BARRIO                                                         |                                                       |                                       |                    |                                                                         |                         |               |       |
|                     |                                                                    | (Contact Person)                                      |                                       | ٠                  |                                                                         |                         |               |       |
| DIAM                | OND BANQUET                                                        | HALL, INC                                             |                                       |                    |                                                                         |                         |               |       |
|                     |                                                                    | (Firm/Company)                                        |                                       | -                  |                                                                         |                         |               |       |
| 6802 V              | V HILLSBOROU                                                       | GH AVE SUITE 8                                        |                                       |                    |                                                                         |                         |               |       |
|                     |                                                                    | (Address)                                             | ·                                     | -                  |                                                                         |                         |               |       |
| TAMP                | 'A. FLORIDA 336                                                    | 34                                                    |                                       |                    |                                                                         |                         |               |       |
|                     | ((                                                                 | City, State and Zip Code)                             |                                       |                    |                                                                         |                         |               |       |
| E-r                 | nail Address: (to b                                                | e used for future annual re                           | port notifications)                   | -                  |                                                                         |                         |               |       |
| For fu              | rther information                                                  | on concerning this ma                                 | tter, please call:                    |                    |                                                                         |                         |               |       |
|                     | LIA BARRIO                                                         |                                                       | at ( <sup>813</sup>                   | ) <sup>546-3</sup> | 3194                                                                    |                         |               |       |
|                     | (Name of Conta                                                     | et Person)                                            |                                       | (Day               | ytime Telephone Number)                                                 | _                       |               |       |
| Enclo<br>dollar     | sed is a check f<br>s and drawn on                                 | or the following amou<br>a bank located in the        | ınt: (All checks p<br>United States)  | roces              | sed by this office must                                                 | be paya                 | ble in        | US    |
| (\$25 fc<br>& \$125 | 0.00 Filing Fees<br>or Conversion<br>of for Articles<br>anization) | □\$155.00 Filing Fees<br>and Certificate of<br>Status | □\$180.00 Filing<br>and Certified Cop |                    | □S185.00 Filing Fees.<br>Certified Copy, and<br>Certificate of Status ÷ | <b>P</b> (0)            |               |       |
| New I<br>Divisi     | EET ADDRESS<br>Filing Section<br>on of Corporation<br>Building     |                                                       | New Fi                                | ling S<br>n of C   | Corporations                                                            | SECRETARY<br>VLLAHASSEI | 18 DEC 17     |       |

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

P1500000 7207

# 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: DIAMOND BANQUET HALL, INC.                                                                                                                                                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (Enter Name of Other Business Entity)                                                                                                                                                                                                                                                                                                                                                     |
| 2. The "Other Business Entity" is a INCORPORATION  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.                                                                                                                                                                                                                 |
| (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)                                                                                                                                                                                                                                                                                                                           |
| 01/22/2015<br>on                                                                                                                                                                                                                                                                                                                                                                          |
| on (date of organization, formation or incorporation)                                                                                                                                                                                                                                                                                                                                     |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  DIAMOND BANQUET HALL, LLC                                                                                                                                                                                                                                                    |
| (Enter Name of Florida Limited Liability Company)                                                                                                                                                                                                                                                                                                                                         |
| 4. If not effective on the date of filing, enter the effective date: 12/12/2018                                                                                                                                                                                                                                                                                                           |
| (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 PH 5: 14

| Signed this         | s 12 day of DECEMBER                                        | 20 <u>18</u> .                                            |                |
|---------------------|-------------------------------------------------------------|-----------------------------------------------------------|----------------|
|                     | of Authorized Representative of                             |                                                           |                |
| Signature           | of Authorized Roprosentatives                               | 24                                                        |                |
| Printed Na          | of Authorized Representative: Ime: KARELIA BARRIO           | Title: MGR                                                |                |
|                     | ,                                                           | <i>'</i><br><u>y:</u> [See below for required signature(s | VI.            |
| <u>organitar er</u> | Jan                     | y. (See below for required signature(s                    | Л              |
| Signature:          |                                                             |                                                           |                |
| Printed Na          | me:KARELIA BARRIO                                           | Title: PRESIDENT                                          |                |
| Signature:          |                                                             |                                                           |                |
| Printed Na          | me:                                                         | Title:                                                    |                |
|                     |                                                             |                                                           |                |
| Signature:          |                                                             |                                                           |                |
| Printed Na          | .me:                                                        | Title:                                                    |                |
| Signature           |                                                             |                                                           |                |
| Printed Na          | .me:                                                        | Title:                                                    |                |
|                     |                                                             |                                                           |                |
| Signature:          |                                                             |                                                           |                |
| Printed Na          | me:                                                         | Title:                                                    |                |
| Cimatura            |                                                             |                                                           |                |
| Printed Mar         | me                                                          | Title:                                                    |                |
| Timed Na            | <u></u>                                                     | Tric                                                      |                |
| <u>If Flori</u> da  | Corporation:                                                |                                                           |                |
| Signature c         | of Chairman, Vice Chairman, Director,                       |                                                           |                |
| If Directors        | s or Officers have not been selected, an                    | Incorporator must sign.                                   |                |
| 10 m                |                                                             |                                                           |                |
| II Florida          | General Partnership or Limited Lial of one General Partner. | bility Partnership:                                       |                |
| Signature (         | of one General Partner.                                     |                                                           |                |
| If Florida          | Limited Partnership or Limited Lial                         | bility Limited Partnershin:                               |                |
| Signatures          | of ALL General Partners.                                    | <u> </u>                                                  |                |
|                     |                                                             |                                                           |                |
| All others:         |                                                             |                                                           |                |
| Signature o         | of an authorized person.                                    |                                                           |                |
| Fees:               |                                                             | ••                                                        |                |
| <u>, ccs.</u>       |                                                             |                                                           | Ā              |
| Art                 | ticles of Conversion:                                       | \$25.00                                                   |                |
| Fee                 | es for Florida Articles of Organization                     |                                                           | 14<br>14<br>25 |

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

Certified Copy: Certificate of Status:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE 1 - Name:                                                                                                                                                                                                          |                                                                                                                                                                             |                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| The name of the Limited Liability Company i                                                                                                                                                                                | S:                                                                                                                                                                          |                                                                                      |
| DIAMOND BANQUET HALL, LLC                                                                                                                                                                                                  |                                                                                                                                                                             |                                                                                      |
| (Must contain the words "Limited Liabi                                                                                                                                                                                     | lity Company, "L.L.C.," or "LLC.")                                                                                                                                          | <del></del>                                                                          |
| ARTICLE II - Address:                                                                                                                                                                                                      |                                                                                                                                                                             |                                                                                      |
| The mailing address and street address of the                                                                                                                                                                              | principal office of the Limited                                                                                                                                             | d Liability Company is:                                                              |
| Principal Office Address:                                                                                                                                                                                                  | Mailing Address:                                                                                                                                                            |                                                                                      |
| 6802 W HILLSBOROUGH AVE SUITE 8                                                                                                                                                                                            | 6802 W HILLSBOROUGH A                                                                                                                                                       | VE SUITE 8                                                                           |
| TAMPA, FL 33634                                                                                                                                                                                                            | TAMPA, FL 33634                                                                                                                                                             |                                                                                      |
|                                                                                                                                                                                                                            |                                                                                                                                                                             |                                                                                      |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registeres entity with an active Florida registration.)                                                                  | ed Office, & Registered Age<br>istered Agent. You must designate an i                                                                                                       | ent's Signature:<br>ndividual or another                                             |
| The name and the Florida street address of the                                                                                                                                                                             | registered agent are:                                                                                                                                                       |                                                                                      |
| KARELIA BARRIO                                                                                                                                                                                                             |                                                                                                                                                                             |                                                                                      |
| Nar                                                                                                                                                                                                                        | ne                                                                                                                                                                          |                                                                                      |
| 6802 W HILLSBOROUGH AV                                                                                                                                                                                                     | ZE SUITE 8                                                                                                                                                                  |                                                                                      |
|                                                                                                                                                                                                                            | O. Box NOT acceptable)                                                                                                                                                      |                                                                                      |
| TAMPA                                                                                                                                                                                                                      | FL 33634                                                                                                                                                                    |                                                                                      |
| City                                                                                                                                                                                                                       | Zip                                                                                                                                                                         |                                                                                      |
| Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as r | in this certificate, I hereby according this certificate, I hereby according to the comply performance of my duties, and egistered agent as provided for gnature (REQUIRED) | cept the appointment as<br>y with the provisions of all<br>ad I am familiar with and |
| (CONTI                                                                                                                                                                                                                     | HUL <i>u)</i>                                                                                                                                                               |                                                                                      |

| 4  | D | TI |    | Г  | T3.7  |
|----|---|----|----|----|-------|
| /1 | к |    | L. | LE | 1 V - |

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

| "MGR" = Manager<br>MGR          | KARELIA BARRIO                  |
|---------------------------------|---------------------------------|
| <u> </u>                        | 6802 W HILLSBOROUGH AVE SUITE 8 |
|                                 | TAMPA, FL 33634                 |
|                                 | TAMPA, FL 33034                 |
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| (Use attachment if necessary)   |                                 |
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| LE V: Other provisions, if any. |                                 |
|                                 | 57                              |
|                                 |                                 |
|                                 |                                 |

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.

KARELIA BARRIO

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)