# L19000003567

(Requestor's Name)
(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:
·

Office Use Only

M. MOON JAN 0 7 2019



400321390954

12/05/18--01008---010 \*\*155.00



W18-106758



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 11, 2018

MARTIN MELO 425 NE 22ND ST STE 301 MIAMI, FL 33137

SUBJECT: MARGARET PLACE LLC

Ref. Number: W18000106758

We have received your document for MARGARET PLACE LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Matthew T Moon Regulatory Specialist III Letter Number: 818A00025404

#### **COVER LETTER**

TO:	New Filing So Division of C						
SHEL		RET PLACE LLC					
3000	EC1.	(Name of Res	sulting Florida Limited	Company)			
				, and fees are submitted in accordance with s. 60			ther
Please	return all corre	espondence concernin	g this matter to:				
MART	IN F MELO						
		(Contact Person)					
MARG	ARET PLACE L						
		(Firm/Company)					
425 N	E 22ND ST STE	301					
		(Address)	<del></del>				
МІАМІ	, FL 33137						
	((	City, State and Zip Code)	-				
meloco	ontractors@hotm	nail.com					
E-m	ail Address: (to b	e used for future annual re	port notifications)				
For fu	rther information	on concerning this ma	tter, please call:				
SARA	OQUENDO		at ( <sup>305</sup>	381290			
	(Name of Conta	ct Person)	(Area Code)	381290 (Daytime Telephone Numbe	:r)		
		or the following amou a bank located in the	•	cessed by this office m	ust be payab	le in U	JS
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles nization)	■\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fe and Certified Copy	es \$185.00 Filing Fee Certified Copy, and Certificate of Status	SECRE FALLAH	18 DEC	
New I Division Clifton 2661 I	ET ADDRESS Filing Section on of Corporation Building Executive Central assec, FL 3230	ions er Circle	New Filir Division ( P. O. Box	G ADDRESS: ag Section of Corporations : 6327 ee, F1, 32314	ETARY UR STATE HASSEEL FLORIO	EC 28 PH 3108	

#### **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.

	name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  ARET PLACE LLC
	(Enter Name of Other Business Entity)
2. The	"Other Business Entity" is a
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First or	rganized, formed or incorporated under the laws of
12/1 on	18/2012
	e of organization, formation or incorporation)
3. The	name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MARG	ARET PLACE LLC
	(Enter Name of Florida Limited Liability Company)
4. If n	ot effective on the date of filing, enter the effective date:
the da <u>Note:</u> 1	ffective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after te this document is filed by the Florida Department of State.)  f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt'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 which	"Converted or Other Business Entity" has agreed to pay any members having appraisal fifs the amount to ch such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

3

Signed this 30 day of NOVEMBER	_20 <u>13</u>		
Signature of Authorized Representative of Limi			
Signature of Authorized Representative: Printed Name: MARTIN FERREIRA DE MELO	Title: MANAGER MEMBER	_	
Signature(s) on behalf of Other Business Entity:	•		
Signature: Printed Name: MARTIN FERREIRA DE MELO			
Printed Name: MARTIN FERREIRA DE MELO	Title: MEMBER		
Signature:Printed Name:		_	
Printed Name:	_ Title:	<del></del>	
Signature:Printed Name:	The	_	
Signature:Printed Name:	Title	<del></del>	
Signature:Printed Name:	Title	_	
Signature:Printed Name:	Title:		
If Florida Corporation:			
Signature of Chairman, Vice Chairman, Director, or C			
If Directors or Officers have not been selected, an Inc	corporator must sign.		
If Florida General Partnership or Limited Liabilit	ty Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:		
All others:			7:
Signature of an authorized person.		As =	
Fees:		11 A DEC	
Articles of Conversion:	\$25.00	28.8 38.8 38.8 38.8 38.8 38.8 38.8 38.8	
Fees for Florida Articles of Organization:	\$125.00 \$20.00 (Ontional)		
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)	11 co	
	•		

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
The name of the Elimited Blashity Company is.		
MARGARET PLACE LLC		
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address:		
The mailing address and street address of the pr	ncipal office of the Limited Liabili	ity Company is:
Principal Office Address:	Mailing Address:	
MARTIN FERREIRA DE MELO	425 NE 22ND ST STE 301	
425 NE 22ND ST STE 301 MIAMI, FL 33137	MIAMI, FL 33137	<del></del>
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Sig	nature: or another
The name and the Florida street address of the re	egistered agent are:	
MARTIN FERREIRA DE MELO		
Name		
425 NE 22ND ST STE 301		
Florida street address (P.O.	Box NOT acceptable)	
MIAM	FL 33137	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacid statutes relating to the proper and complete pa accept the obligations of my position as regi	this certificate, I hereby accept the a ty. I further agree to comply with th erformance of my duties, and I am fo	appointment as e provisions of all amiliar with and
	m Ag	SF6
Registered Agent's Signa	ature (REQUIRED)	F   L
(CONTINU	JED)	PH & OB

## ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR - Wanager MGR	MARTIN FERREIRA DE MELO	
	425 NE 22ND ST STE 301	_
	MIAMI, FL 33137	_
	1717 WHI, 1 C 00 107	_
MGR	CARLOS FERREIRA DE MELO	
<del></del>	425 NE 22ND ST STE 301	_
	MIAMI, FL 33137	_
		-
		_
		_
	•	_
<del></del>	- Po	<u>-</u>
	• • • • • • • • • • • • • • • • • • • •	500 €20 •
	<u></u>	93G
(Use attachment if necessary)		(%) (%)
(Ose attachment if flecessary)		
		PH
ICLE V: Other provisions, if any.	t. 	ယ့
to and providence, it may.	<b>受験</b> 第2	Ca
<u>REQUIRED</u> SIGNATURE:	Λ	
	/M/\	
61		_
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware t	
any raise information submitted in a docu	ment to the Department of State constitutes a third degree fel	.hat lony
as provided for in s.817.155, F.S.		.5113
MARTIN FERREIRA DE MELO		
	ped or printed name of signee	-
· 3	Filing Food	

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)