# 119000098552

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SECRETARY OF STATE OF

C RICO APR 0 8 2019

## **COVER LETTER**

TO:	New Filing Se Division of C				
SUBJ	ECT: PTH FIN	ANCIAL. LLC			
2.022		(Name of Res	sulting Florida Limited Co	empany)	
				nd fees are submitted to con accordance with s. 605.1045	
Please	e return all corre	espondence concernin	g this matter to:		
Jose N	I. de la O				
		(Contact Person)			19 V
AGI R	egistered Agents, l	Inc.			APR NPR
		(Firm/Company)	<del></del>		- 第 本音 - 9 章
1000 E	Brickell Ave., Suite	: 300			- 8 P
-		(Address)			<b>3</b> 89
Miami	, FL 33131				영 원통 교 등
	((	City, State and Zip Code)			တ၊ နို
	agi-ra.com				
E-r	nail Address: (to b	e used for future annual re	port notifications)		
For ft	orther information	on concerning this ma	tter, please call:		
Jose N	l. de la O		_at ( 305 ) 416-	6800	
	(Name of Conta	ct Person)	(Area Code) (Da	aytime Telephone Number)	
		or the following amou a bank located in the		ssed by this office must be p	ayable in US
(\$25 fc & \$125	0.00 Filing Fees or Conversion of for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing Fees and Certified Copy	□S185.00 Filing Fees, Certified Copy, and Certificate of Status	
New I Divisi Clifto 2661	EET ADDRESS Filing Section ion of Corporati n Building Executive Center nassec, FL 3230	ions er Circle	New Filing	Corporations 327	

### **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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: PTH FINANCIAL, 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 (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)
February 19, 2014
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PTH FINANCIAL, 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 5th day of April	20_19
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Printed Name: Robert R. Adams	Title: Authorized Representative
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:Printed Name: Robert R. Adams	Title: Authorized Representative
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty 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)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	., LLC (Must contain the words "Limited Lia	bility Company, "L.L.C" or "LLC."}	
		, op,. a.a.a.a. w 0.00.	
ARTICLE II -		e principal office of the Limited L	iahilin Campanin
The manning add	aress and street address of the	e principal office of the Limited L	ability Company is:
Principal Offic	e Address:	Mailing Address:	
1800 SW 1st Ave.		1800 SW 1st Ave.	
Suite 601		Suite 601	<del>-</del>
			<del></del>
(The Limited Liabilit	- Registered Agent, Registe ty Company cannot serve as its own R t an active Florida registration.)	Miami, FL 33129  red Office, & Registered Agent' egistered Agent. You must designate an indiv	ridual or another
ARTICLE III (The Limited Liability business entity with	ty Company cannot serve as its own R	red Office, & Registered Agent' egistered Agent. You must designate an indiv	idual or another
ARTICLE III (The Limited Liability business entity with	ty Company cannot serve as its own R i an active Florida registration.)  he Florida street address of the AGI Registered Agents, Inc.	red Office, & Registered Agent' egistered Agent. You must designate an indiv	idual or another  19 APR -8
ARTICLE III (The Limited Liability business entity with	ty Company cannot serve as its own R i an active Florida registration.)  he Florida street address of the AGI Registered Agents, Inc.	red Office, & Registered Agent egistered Agent with the registered agent are:	idual or another
ARTICLE III (The Limited Liability business entity with	ty Company cannot serve as its own R i an active Florida registration.)  he Florida street address of the AGI Registered Agents, Inc.  No. 1000 Brickell Ave., Suite 300	red Office, & Registered Agent egistered Agent with the registered agent are:	OlVISION OF CORPORALI
ARTICLE III (The Limited Liability business entity with	ty Company cannot serve as its own R i an active Florida registration.)  he Florida street address of the AGI Registered Agents, Inc.  No. 1000 Brickell Ave., Suite 300	ered Office, & Registered Agent' egistered Agent' egistered Agent. You must designate an indivine registered agent are:	idual or another

(CONTINUED)

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

### 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	IOCE ANTONIO DICTRI
MGR	JOSE ANTONIO PIETRI
	1800 SW 1st Ave., Suite 601
	Miami, FL 33129
(Use attachment if necessary)	
•	
CLE V: Other provisions, if any.	
<u> </u>	
REQUIRED SIGNATURE:	<i>l</i>
	`
////	(
Signature of a member or	an authorized representative of a member
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware t
any false information submitted in a docu	iment to the Department of State constitutes a third degree fel
as provided for in s.817.155, F.S.	
Robert R. Adams, Authorized Person	
T	yped or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)