# L19000152696

(Re	questor's Name)	
(Address)		
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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# COVER LETTER

TO:	New Filing S Division of C							
SUB.	JECT: RIDGES	4313 LLC						
		(Name of Re	sulting	Florida Limi	ed Cor	mpany)		
						nd fees are submitted to conv accordance with s. 605.1045,		
Please	e return all corr	espondence concernin	g this	matter to:				
ANGI	EL D. CORDOVA							
		(Contact Person)			•			
ANGI	EL D. CORDOVA	& CO					<b></b>	
		(Firm/Company)			•		ط. عد	- t
780 N	.W. 42 AVENUE	SUITE 325					`E	
		(Address)			•		9 . ૧૫ – 7 - ૧૫	Ω. Ω.
MIAN	II, FL 33126						$\mathbb{R}$	7.19
	{(	City, State and Zip Code)	· <del>-</del> -				2: 3 <b>3</b>	Com on Allow
E-r	nail Address: (to b	ic used for future annual re	port no	otifications)				~
For fu	irther informati	on concerning this ma	tter. p	lease call:				
ANGI	EL D.CORDOVA		at (	305	\ 444-5			
_	(Name of Conta	ict Person)		(Area Code)	(Day	ytime Telephone Number)		
		or the following amou a bank located in the		•	roces:	sed by this office must be pa	yable in US	
(\$25 fc & \$125	0.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status		180.00 Filing Certified Cop		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
New I Divisi Clifto	EET ADDRESS filing Section on of Corporat n Building Executive Cent	ions		New Fi Divisio P. O. B	ling S n of C ox 63	Corporations		

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 pric RDGES 4313 CORP	or to the filing of the Articles of Conversion is:
(Enter Name of Other Business Ent	ity)
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partners	P13000099043
(Enter entity type. Example: corporation, limited partners	hip, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of FLO	ORIDA 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)
12/12/2013	
On	
3. The name of the Florida Limited Liability Company as set	forth in the attached Articles of Organization:
RIDGES 4313 LLC	
(Enter Name of Florida Limited Liability Co	mpany)
4. If not effective on the date of filing, enter the effective dat	e:
(The effective date: Cannot be prior to date of receipt or f	-
the date this document is filed by the Florida Department Note: If the date inserted in this block does not meet the applicable statut	,
document's effective date on the Department of State's records.	ony timig requirements, this date will not be fisted as the
5. The plan of conversion has been approved in accordance w	ith all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay a	my members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

SHOULTY BOARD LO HILL BE

Signed this 5 day of June	20 19
Signature of Authorized Representative of Lim	* 1 M
Signature of Authorized Representative: Printed Name: LUIS M. GUEDEZ	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: LIVIS M. GUEDEZ	Title: PRESIDENT
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	Officer.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	
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)

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liab	ility Company is	::			
RIDGES 4313 LLC (Must contain the	words "Limited Liabil	ity Company, "L.L.C.," or "L.L.	C.")		
ARTICLE II - Address: The mailing address and stree	t address of the p	orincipal office of the Li	mited Liability Co	ompany	/ is:
Principal Office Address:		Mailing Address:			
MIAMI, FL 33129		1581 BRICKELL AVE MIAMI, FL 33129	APT 1603		
ARTICLE III - Registered A (The Limited Liability Company cannot business entity with an active Florida r	serve as its own Regi				
The name and the Florida stre	et address of the	registered agent are:		JC 61	JISTARC 133
ANGEL D		· · · · · · · · · · · · · · · · · · ·	<del></del>	æ	무근
	Nam	ie		-1	min Say
780 N.W. 4	780 N.W. 42 AVENUE SUITE 32			7	불류
Florida si	treet address (P.C	D. Box NOT acceptable	)	2:43	
MIAMI	<u> </u>	FL 33126	<u> </u>	ω	ΞĘ
	City	Zip			
Having been named as regis liability company at the pregistered agent and agree to statutes relating to the propaccept the obligations of Regist	place designated it of act in this capa per and complete my position as re	n this certificate, I hereb city. I further agree to c performance of my dutie	y accept the appoi omply with the pro es, and I am famili	intment ovisions iar with	as of all 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	LUIS M. GUEDEZ
	1581 BRICKELL AVE APT 1603
	MIAMI, FL 33129
MGR	EMILIA ESTE DE GUEDEZ
- P	1581 BRICKELL AVE APT 1603
	MIAMI, FL 33129
	-
(Use attachment if necessary)	`
	-
	Ĺ,
ARTICLE V: Other provisions, if any.	
REQUIRED NONATURE:	
REQUIRED SIGNATURE:	
/ <i>BH</i>	
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 docum as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree felony
LUIS M. GUEDEZ	
Tyr	ped or printed name of signee
,,	Filing Rees

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)