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(R	Requestor's Name)		
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SUITE 310
MIAMI, FLORIDA 33131

E-MAIL ADDRESS nelson@miami-intl-law.com WEB PAGE www.miami-intl-law.com

NELSON SLOSBERGAS ATTORNEY AND CIVIL LAW NOTARY

(305) 374-0030 FAX (305) 374-2855

June 26, 2019

Via Fedex

Secretary of State Registration Section/Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

RE: LUMAN INVESTMENTS LLC, a Florida Corporation

Dear Sir or Madam:

Please find attached the Articles of Conversion for Other Business Entity into Florida Limited Liability Company for Luman Investments LLC, and check for the filing fee in the amount of \$150.00.

Thank you for your attention to this matter.

Very truly yours,

Rita Salgado

Corporate Legal Secretary [e-mail: rita@miami-intl-law.com]

fin Julgado

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.608.1045, Florida Statutes

	(Enter Name of Other Bisiness Entity)
=	The "Other Business Entity" is a CORPORATION (Botter entity type Example: corporation, limited partnership, general partnership, common law or business trust, ox.)
	(Enter entity type: Example: corporation, limited partnership, general partnership, comman law or business inist, or, i
	Risk Organized Compart of the present of the FLORIDA
	FERRITARY (2) 2002
	tible of organization, formation or incorporation;
	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: LUMAN INVESTMENT LLC
	Thorer Name of Florida Lumiten Liability Company)
(b)	If not effective on the date of filing, enter the effective date: he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after e date this document is filed by the Florida Department of State.) to: If the date inserved in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ament seffective date on the Department of State's records.
5	The plan of conversion has been approved in accordance with all applicable statutes
e	The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are antifled under ss. 605 1006 and 605,1061-605,1073. F.S.

Signed this day of	
Signature of Authorized Represe	ntative of Limited Liability Company:
Signature of Authorized Represent Printed Name, <u>Manuel Loureiro</u>	ativeFitle: Manager
Signature(s) on behalf of Other By	estices Entity: (See below for required signature(s))
Signature. Saund.	uuco
Printed Name: Manuel Loureiro	Title: President
Signature.	Fitle: President
Printed Name. LuiS boths	Fille: President
Signature Printed Name	Title:
Printed Name:	Title
Printed Name:	Tule:
	Title
If Florida Corporation: Signature of Chairman, Vice Chairma If Directors or Officers have not been	in Director or Officer
If I borida General Partnership or I Signature of one General Partner.	<u>.imited Liability Partnership:</u>
It Florida Limited Partnership or I Signatures of ALL General Partners.	imited Liability Limited Partnership:
All others: Signature of an authorized person.	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
LUMAN INVEST		
(Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pro-	rincipal office of the Limited Liab	oility Company is:
Principal Office Address:	Mailing Address:	
1417 Hamlin Ave., Unit F.	1417 Hamlin Ave., Unit F.	
St. Cloud, FL, 34771	St. Cloud, FL, 34771	<u> </u>
		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r	ered Agent. You must designate an individu	al or another
LUIS LLORI	TN:e	<u>ن</u> بيا
Name		
rume		828
1125 Ginger (P
Florida street address (P.O.	Box NOT acceptable)	19 JUH 28 PM 1:20
Weston	FL 33326	20
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 capacistatutes relating to the proper and complete paccept the obligations of my position as regional Registered Agent's Signal	this certificate, I hereby accept the ty. I further agree to comply with erformance of my duties, and I am istered agent as provided for in Cl	e appointment as the provisions of all familiar with and

<u>Title:</u> "AMBR" - Authorized Member "MGR" - Manager	Name and Address:
AMBR	D
	Proventos Investments, LLC
	3411 Silverside Road, Tainall Building #104
	Wilmington, DE, 19810
	
 	
(Use attachment if necessary)	
and the medestary	
FICLE V: Other provisions, if any	
	-
REQUIRED SIGNATURE:	· / · · ·
7111	ulkumi
Signature of a member or at this document is excepted in accordance we any take information submitted in a docume as provided to in \$.817.155, F.S.	1 authorized representative of a member ith section 605.0203 (1) (b). Florida Statutes, I am aware that int to the Department of State constitutes a third degree fellony
	Manuel Loureiro
	Manuel Loureiro d or printed name of signee

ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability

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