# L19000216505

| (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



800331989718

07/29/19--111. 113 --111.00

2010 SEP -3 AM 8: 05 SECRETARY OF STATE TALLAHASSEE, FL

N CULLIGAN SEP ' 4 2019

## COVER LETTER

|  | / Filing.Se<br>ision of C | ection<br>orporations                                 |                                     |                            |  |
|--|---------------------------|---|-------------------------------------|----------------------------|--|
| SUBJECT:   | TIERF                     | RA DEL SOL INVESTME                                   | ENTS LLC                            |                            |  |
| SOBSECT  | -                         | (Name of Res  | ulting Florida Limite               | d Con                      | npany)   |
|  |                           |   | _                                   |                            | d fees are submitted to convert an "Other coordance with s. 605.1045, F.S. |
| Please retur   | n all corre               | espondence concerning                                 | g this matter to:                   |                            |  |
| E. ADRIAN  | MORLAN                    | NE  |                                     |                            |  |
|  |                           | (Contact Person)                                      | <del></del>                         |                            |  |
| E MORLANI  | NE AND S                  | ON ACCOUNTING INC                                     |                                     |                            |  |
|  |                           | (Firm/Company)  |                                     |                            |  |
| 1275 W 47T   | H PL SUIT                 | E 312   |                                     |                            |  |
|  |                           | (Address)   |                                     |                            |  |
| HIALEAH, F   | L 33012                   |   |                                     |                            |  |
|  | ((                        | City, State and Zip Code)                             |                                     |                            |  |
| BADAD@M  | SN.COM                    |   |                                     |                            |  |
| E-mail Ac  | ldress: (to b             | e used for future annual re                           | port notifications)                 |                            |  |
| For further  | informatio                | on concerning this ma                                 | tter, please call:                  |                            |  |
| ADRIAN MORLANNE  |                           | _at (   | 360-3                               | 3004                       |  |
| (Name of Contact Person)   |                           | (Area Code)   | (Day                                | rtime Telephone Number)    |  |
|  |                           | or the following amou<br>a bank located in the        | •                                   | ocess                      | sed by this office must be payable in US                                   |
| \$150.00 F<br>(\$25 for Conv<br>& \$125 for Al<br>of Organization  | ersion<br>rticles         | □\$155.00 Filing Fees<br>and Certificate of<br>Status | ■\$180.00 Filing and Certified Copy |                            | ☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status           |
| STREET A<br>New Filing<br>Division of<br>Clifton Bui<br>2661 Execu | Section<br>Corporati      | ions  | New Fil<br>Division<br>P. O. Bo     | ling S<br>n of C<br>ox 63: | Corporations   |

Tallahassee, FL 32301



August 9, 2019

E. ADRIAN MORLANNE E. MORLANNE AND SON ACCOUNTING INC 1275 W 47TH PL SUITE 312 HIALEAH, FL 33012

SUBJECT: TIERRA DEL SOL INVESTMENTS LLC

Ref. Number: W19000073062

We have received your document for TIERRA DEL SOL INVESTMENTS LLC and your check(s) totaling \$180.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

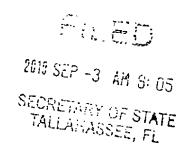
Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 019A00016378



# 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:  TIERRA DEL SOL INVESTMENTS INC  |
|---|
| (Enter Name of Other Business Entity)   |
| CORPORATION  2. The "Other Business Entity" is a  |
| (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)   |
| 07/03/2018 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: TIERRA DEL SOL INVESTMENTS. 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 24 day of JULY  | 20 19   |
|---|---|
| Signature of Authorized Representative                                      |   |
| Signature of Authorized Representative:                                     | Calolros  |
| Printed Name: CARLOS CROES  | Title: MNGR                                     |
| Tritted Public.   |   |
| Signature(s) on behalf of Other Busines                                     | s Entity: [See below for required signature(s)] |
| Signature: Color Cross  |   |
| Printed Name: (A-2105 C.2085  | Title: MUSR.                                    |
| Trance Ivanie   |   |
| Signature:  |   |
| Printed Name:   | Title:  |
| e:  |   |
| Signature:  | Title:  |
| rrinted Name  | Title.  |
| Signature:  |   |
| Printed Name:   | Title:  |
|   |   |
| Signature:  | Title:  |
| Printed Name:   | Title:  |
| Signatura   |   |
| Printed Name  | Title:  |
| Timed Name.   |   |
| If Florida Corporation:   |   |
| Signature of Chairman, Vice Chairman, D                                     |   |
| If Directors or Officers have not been sele                                 | ected, an Incorporator must sign.               |
| TERE II Committee Line  | A. J. I. S. L. Mar. Domain combine              |
| If Florida General Partnership or Limi<br>Signature of one General Partner. | ted Liability Partnership:                      |
| Signature of one General Farther.   |   |
| If Florida Limited Partnership or Limi                                      | ted Liability Limited Partnership:              |
| Signatures of ALL General Partners.   |   |
|   |   |
| All others:   |   |
| Signature of an authorized person.  |   |
| Fees:   |   |
| Articles of Conversion:   | \$25.00   |
| Fees for Florida Articles of Orga   | ·   |
| Certified Copy:   | \$30.00 (Optional)                              |
| Certificate of Status:  | \$5.00 (Optional)                               |
| Commodic of Status.   | φυίου (Optional)                                |

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

|  | L INVESTMENTS LLC   |  | <u></u>  |
|--|---|--|--|
| (M   | lust contain the words "Limited Lia   | bility Company, "L.L.C.," or "LLC.")   |  |
| ARTICLE II - A The mailing addre                                 |   | e principal office of the Limited L  | iability Company is:                           |
| Principal Office   | Address:  | Mailing Address:   |  |
| 6744 NW 72 AVE   |   | 6744 NW 72 AVE   |  |
| MALANA EL COACO  |   |  |  |
| (The Limited Liability C   | Registered Agent, Registe Company cannot serve as its own Re active Florida registration.)                                      | ered Office, & Registered Agent<br>egistered Agent. You must designate an indiv                              | vidual or another                              |
| ARTICLE III - I (The Limited Liability C business entity with an | Company cannot serve as its own Ron active Florida registration.)  Florida street address of the                                | ered Office, & Registered Agent<br>egistered Agent. You must designate an indiv                              | vidual or another  SEON                        |
| ARTICLE III - I (The Limited Liability C business entity with an | Company cannot serve as its own Ronactive Florida registration.)  Florida street address of the CARLOS CROES                    | ered Office, & Registered Agent<br>egistered Agent. You must designate an indiv                              | vidual or another  SEON                        |
| ARTICLE III - I (The Limited Liability C business entity with an | Company cannot serve as its own Ronactive Florida registration.)  Florida street address of the CARLOS CROES                    | ered Office, & Registered Agent<br>egistered Agent. You must designate an indi-<br>the registered agent are: | vidual or another  SEON                        |
| ARTICLE III - I (The Limited Liability C business entity with an | Company cannot serve as its own Renactive Florida registration.)  Florida street address of the CARLOS CROES  Na 6744 NW 72 AVE | ered Office, & Registered Agent<br>egistered Agent. You must designate an indi-<br>the registered agent are: | 2019 SEP -3 AM 8: SECKETA AY OF STALLA MASSEE, |
| ARTICLE III - I (The Limited Liability C business entity with an | Company cannot serve as its own Renactive Florida registration.)  Florida street address of the CARLOS CROES  Na 6744 NW 72 AVE | ered Office, & Registered Agent<br>egistered Agent. You must designate an indiv<br>the registered agent are: | 2019 SEP -3 AM 3: SECKETARY OF STALLARROSSEE,  |

registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

| <u>Title:</u> "AMBR" = Authorized Member                           | Name and Address:   |                |
|--|---|----------------|
| "MGR" = Manager  |   |                |
| MGR  | CARLOS CROES<br>6744 NW 72 AVE  |                |
|  | MIAMI, FL 33166   |                |
|  | WILAWII, P.C 33100  |                |
| <del></del>  |   |                |
|  |   |                |
|  |   |                |
|  |   |                |
|  |   |                |
|  |   |                |
|  | 23  | 6:02           |
|  | 50  | <u>تة</u><br>ن |
|  | Fri   | SEF            |
|  | F 17  | دئ را          |
| (Use attachment if necessary)                                      |   | j.             |
|  | ري.<br>د بيان د<br>د بيان د ب  | 류 <b>프</b>     |
| ICLE V: Other provisions, if any.                                  | 7<br>7  | W 80 05        |
| TCLE V: Other provisions, it any.                                  | ri-   | 7              |
|  |   |                |
|  |   |                |
| DECHIDED CICNATUDE.  |   |                |
| REQUIRED SIGNATURE:  |   |                |
| Canplies   |   |                |
| Signature of a member or a This document is executed in accordance | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felony |                |