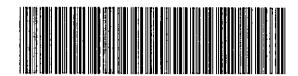
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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

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COVER LETTER

TO: New Filing Section

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of C	Corporations		
SUBJECT: Las Poll	las Hermanas Properties	LLC	
		sulting Florida Limited Cor	mpany)
The enclosed Article Business Entity" into	es of Conversion, Artic o a "Florida Limited L	eles of Organization, a iability Company" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
Ashley Leyva			
	(Contact Person)		
	(Firm/Company)	.,,	
11115 NW 61st Ave			
	(Address)		
Hialeah, Fl 33012			
(City, State and Zip Code)		
ash.mail1189@gmail.	com		
E-mail Address: (to)	or used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
Ashley Leyva			1-9591
(Name of Conta	ict Person)	(Area Code) (Day	/time Telephone Number)
Enclosed is a check to dollars and drawn on	for the following amou a bank located in the	int: (All checks proces: United States)	sed by this office must be payable in US
	□\$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
STREET ADDRES New Filing Section Division of Corporat		MAILING A New Filing S Division of C	ection

P. O. Box 6327

Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

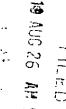
Into

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 prior to the filing of the Articles of Conversion is: Las Pollas Hermanas Properties Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
(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)
06/10/2016 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: Las Pollas Hermanas Properties 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 20th day of August	20 19
Signature of Authorized Representative	of Limited Liability Company:
Signature of Authorized Representative: _ Printed Name: Humberto Leyva	Title: Manager
Signature(s) on behalf of Other Business I	Entity: [See below for required signature(s)]
Signature: Oshley Lyus	Title: CEO
Printed Name: Ashley Leyva	Title: CEO
Printed Name:	Title:
Printed Name:	Title:
Printed Name:	Title:
	/ Hitc
Signature:	
Printed Name:	Title:
Simutuya	
Printed Name:	Title:
	Title.
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Dire	ctor, or Officer.
If Directors or Officers have not been selecte	d, an Incorporator must sign.
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:
If Florida Limited Partnership or Limited	Finbilland to do a positive
Signatures of <u>ALL</u> General Partners.	Liability Limited Partnership:
All others:	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status: MANG 26 AM 9: TS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	

as Pollas Hermanas Properties LLC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	_

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>Mailing Address:</u>
11115 NW 61st Ave	11115 NW 61st Ave
Hialeah, FL 33012	Higleah, FL 33012
	——————————————————————————————————————

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Morales-Rodriguez PA	
N:	ame
1451 NW N River Drive	
Florida street address (I	P.O. Box <u>NOT</u> acceptable)
Miami	[4, 33125
City	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as 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)

(CONTINUED)

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Ashley Leyva

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

Ashley Leyva 11115 NW 61st Ave Hialeah, Fl 33012 Humberto Leyva 11115 NW 61st Ave Hialeah, Fl 33012
11115 NW 61st Ave Hialeah, Fl 33012 Humberto Leyva 11115 NW 61st Ave
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11115 NW 61st Ave
Hialeah, Fi 33012
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thorized representative of a member
ection 605.0203 (1) (b), Florida Statutes, I am aware the Department of State constitutes a third degree fo
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Typed or printed name of signee 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)