# L19000249589

(Requestor's Name)
(Noquestor 5 Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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09/30/19--01004--011 \*\*155.00

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O O'KEEFE OCT 1 6 2019

#### COVER LETTER

TO: New Filing S Division of C			
SUBJECT: NIEVES	PAINT ,LLC		
3000C1		sulting Florida Limit	ted Company)
The enclosed Article Business Entity" into	es of Conversion, Artic o a "Florida Limited L	eles of Organization	on, and fees are submitted to convert an "Otl " in accordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	ig this matter to:	
ALVARO NIEVES BES	NITEZ		
	(Contact Person)		
NIEVES PAINT INC			_
	(Firm/Company)		
20199 RUTHERFORD	······································		-
	(Address)		
PORT CHARLOTTE, E			_
	City, State and Zip Code)		
ALEXEYNIEVES06@C			
E-mail Address: (to b	be used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
ALVARO NIEVES BEN	NITEZ	at ( 941	787-9776
(Name of Conta	act Person)	(Area Code)	(Daytime Telephone Number)
	for the following amou a bank located in the		processed by this office must be payable in U
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	■\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy	
STREET ADDRES	S:	MAILI	ING ADDRESS:
New Filing Section		New Fil	ling Section
Division of Corporat Clifton Building	ions		n of Corporations ox 6327
2661 Executive Cent	er Circle		ssee, FL 32314

Tallahassee, FL 32301

## **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.

(Enter Name of Other B	usiness Entity)
2. The "Other Business Entity" is a CORPORATION	
(Enter entity type. Example: corporation, limit	ed partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the la	ws of
	(Enter state, or if a non-U.S. entity, the name of the country)
01/29/201 <b>8</b> on	
(date of organization, formation or incorporation)	
NIVES PAINT , LLC  (Enter Name of Florida Limited L	Liability Company)
4. If not effective on the date of filing, enter the effe	09/16/2019
(The effective date: Cannot be prior to date of rec the date this document is filed by the Florida Dep	ceipt or filed date nor more than 90 calendar days after partment of State.) cable statutory filing requirements, this date will not be listed as the statutory filing requirements.
6. The "Converted or Other Business Entity" has agree	ed to pay any members having appraisal rights the amount to
which such members are entitled under ss. 605.1006	6 and 605.1061-605.1072, F.S.

Signed this 16 da	y of <u>SEPTEMBER</u>	2019	
Signature of Authorized	Representative of Li	mited Liability Company:	
C:	· · · · · · · · · · · · · · · · · · ·	11/5	
Printed Name: ALVARO N	EVES BENTEZ	Title: PRESIDENT	
		:  See below for required signa	ature(s)}
Printed Name; ALVARO N	VES BENITEZ	Title: PRESIDENT	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
If Florida Corporation:			
Signature of Chairman, Vi			
If Directors or Officers ha	ve not been selected, an	Incorporator must sign.	
<u>If Florida General Partn</u>	ership or Limited Liab	ility Partnership:	
Signature of one General I	Partner.		
		ility Limited Partnership:	
Signatures of <u>ALL</u> Genera	l Partners.		A
All others:			¥
Signature of an authorized	person.		ASS
Fees:			ALLAHASSEE, FLORIDA
Articles of Conve	rsion:	\$25.00	LOR
	rticles of Organization		IDA
Certified Copy:	na.	\$30.00 (Optional)	
Certificate of Stat	ПS.	\$5.00 (Optional)	

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AND AMASSEF FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

NIEVES PAINT LLC	
(Must contain the words "Limited Liz	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of th	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
20199 RUTEHRFORD AVENUE	20199 RUTHERFORD AVENUE
PORT CHARLOTTE : FL 33952	PORT CHARLOTTE, FL 33948
The name and the Florida street address of t  ALVARO NIEVES BENITE  N	
	ENTIE
20199 RUTHERFORD AVE	J1 ( ) 1 J
	P.O. Box NOT acceptable)
Florida street address (	P.O. Box <u>NOT</u> acceptable)

(CONTINUED)

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#### ARTICLE IV-

ALVARO NIEVES BENITEZ.

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	. LIV. NO MENER DESUEER
MGR	ALVARO NIEVES BENITEZ
	20199 RUTHERFORD AVENUE
	PORT CHARLOTTE . FL 33952
MGR	ALEXEI NIEVES GARCELL
	20199 RUTHERFORD AVENUE
	PORT CHARLOTTE , FL 33952.
	<u></u>
	<u> </u>
	S 30
	<u></u>
(Use attachment if necessary)	SDA 36
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
A STATE OF THE STA	(1)
<u>+:U</u>	
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 the iment to the Department of State constitutes a third degree felo

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)