# L20000032218

(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:





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#### **COVER LETTER**

Division of C	orporations		
SUBJECT:	ROSA BLA (Name of Res	NCA L ulting Florida Limited (	LC. Company)
			, and fees are submitted to convert an "Other n accordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:	
KAREN	(Contact Person)	JATT_	
	(Firm/Company)	<u> </u>	
P. O. T	30x 310 (Address)		
WIMAU	City, State and Zip Code)  VA II @ G-A	33598	
(	City, State and Zip Code)		
KJPRE	VAITOGA	MAIL COM	1
E-mail Address: (to b	e used for future annual rep	port notifications)	
For further informati	on concerning this mat	tter, please call:	
KAREN (Name of Conta	J. PREVATI	at ( 813 ) (Area Code)	B33-5122  Daytime Telephone Number)
	for the following amou a bank located in the		cessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	_	es
Muiling Add New Filing S Division of C	ection	Ne	reet Address: ew Filing Section vision of Corporations
DIVISION OF C	or porutions	Di	Tistori Or Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

TO: New Filing Section

## **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 Busi ROSA	BLANCA, I	NC	
	(Enter Name of Other Business E	ntity)	
2. The "Other Business Entity" (Enter entity type. Exa	is a <u>ORPORF</u> mple: corporation, limited partne	rship, general partnership, commo	n law or business trust, etc.)
First organized, formed or incor	porated under the laws of _	FLORIDA	
_	(Ente	r state, or if a non-U.S. entity, the	name of the country)
on CO/O7/199 (date of organization, formation o	r incorporation)	·	
3. The name of the Florida Lim	ited Liability Company as s	et forth in the attached Arti	cles of Organization:
ROSA B	LANCA, LLC.		·
4. If not effective on the date of (The effective date: Cannot be the date this document is filed Note: If the date inserted in this block document's effective date on the Department.	e prior to date of receipt or by the Florida Departmen codes not meet the applicable state	t of State.)	o calendar days after
5. The plan of conversion has b	een approved in accordance	with all applicable statutes.	
6. The "Converted or Other Busi which such members are entit	, , ,	_ ``	sal rights the amount to
			2015 NO TALLATI

Signed this 4th day of February	20 <u>2.O</u> .
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Ka Printed Name: KAKEN J. (YEUATT	ren g Prevall Title: Member
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)
Signature: Karen J. Prevatt Printed Name: KAREN J. Prevatt	
Printed Name: KAREN J. PrevATT	Title: PRESIDENT
Signature: Printed Name:	
Printed Name:	_ Title:
Signature:Printed Name:	m
Printed Name:	Title:
Signature:Printed Name:	Tivi
Signature:Printed Name:	revision of the second of the
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
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)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Comp	pany is:
ROSA BLA	ANCA, LLC.
(Must contain the words "Limite	ed Liability Company, "L.1.,C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5307 SR. 674	P.O. BOX 310 WIMAUMA, FL 33598
WIMAUMA, FL 3359	NIMALIMA, FL 33598
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another  of the registered agent are:
KAREN .	J. PREVATT
5307 5	R. 674
Florida street addre	ss (P.O. Box <u>NOT</u> acceptable)
WIMALIMA	FL 33598 Zip
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)

Title:	Name and Address:	
"AMBR" = Authorized Member	***	
"MGR" = Manager	Q Parison	
_AMBR_	Rosen J / Roun	
	Koven J Prevait P.O BOX 310 VIIM ALLMA 171 33598	
	VVITA ACCIMA . TE 33378	
<del></del>		
LE V: Other provisions, if any.  REQUIRED SIGNATURE:		
	0 -	
~ /	<b>~</b>	
Karen J	1 revall	
This document is executed in accordance wany false information submitted in a document of the control of the co	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the	
Signature of a member or a This document is executed in accordance any false information submitted in a documes provided for in s.817,155, F.S.		

ARTICLE IV-