L20000076002

(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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(2)

COVER LETTER

TO:	New Filing Section			
	Division of Corporat	tions		
			4.1	

SUBJECT: LINEA NEX, LLC.
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

AUGUSTO J. QUINTANILLA
(Contact Person)
LINEA MEX, UC.
(Firm/Company)

1825 PONCE DE LEON BUD. #212

CORAL GABLES, FL. 33134
(City State and Zin Code)

AUGUSTO J QUINTANILLA & GNAIL COM
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

AUGUSTO J. GUINTANIUA at (770) 826-8737
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155,00 Filing Fees and Certificate of Status ☐\$180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

INHS11 (7/17)

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:

Linea Mex. LLC.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Linited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of the state of General partnership, common law or business trust, etc.)

On Office of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Linea Mey. LLC.

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filling, 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.)

5. The plan of conversion has been approved in accordance with all applicable statutes.

document's effective date on the Department of State's records.

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.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this 27th day of JANUARY	_20_ _2 0
/ Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Printed Name: AUGUSTO J. Quintarily	12 a Pertando
Printed Name: AUGUSTO J. QUINTANGLA	Aitle: PIZESIDENT
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Apple of Total	
Printed Name / MIKISTO J. QUINTANILL	Title: PRESIDENT
/	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	<u> </u>
Printed Name:	_ Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If District I the land Denote another and I the land I to be the	to I to the d Dente analytic.
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ALL General Partners.	
All others	
All others: Signature of an authorized person.	
Signature of an audiorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	
conneare of Status.	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LINEA MEX, LL	£
(Must contain the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1825 PONŒ DE LEON BLYD. #2, CORMI GABUES, FL. 33/34	12 1825 PONCE DE LEON BURD #212 CORAL GABLES, FL. 33/34
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The name and the Florida street address of the	ne registered agent are:

KCY BISCAYNE FL 33/49

City Zip

med as registered agent and to accept service of process for the

Name

| SI CRANDON BLVD, #236
| Florida street address (P.O. Box NOT acceptable)

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..

(CONTINUED)

<u> Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
'MGR" = Manager MGR:	Marine T Asintanina		
IVIO R	AUGUSTO J. QVINTANICA 1925 PANE DE LEON BLUD #		
•	CORN GABIES, FL 33134		
			
•			
<u>-</u>	<u></u>		
•	-		
<u> </u>			
•			
71			
(Use attachment if necessary)			
LE V: Other provisions, if any.			
•	-		
DECHIDED SIGNATURE.			
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE:	I faile		
REQUIRED SIGNATURE:	A CONTRACTOR OF THE PARTY OF TH		
Signature of a member o	r an authorized representative of a member		
Signature of a member of This document is executed in accordance	ce with section 605.0203 (1) (b), Florida Statutes. I am awa		
Signature of a member of This document is executed in accordance	ce with section 605.0203 (1) (b), Florida Statutes. I am awa		
Signature of a member of This document is executed in accordant any false information submitted in a doc as provided for in s.817.155, P.S.	ce with section 605.0203 (1) (b), Florida Statutes. I am awar sument to the Department of State constitutes a third degree		
Signature of a member of This document is executed in accordant any false information submitted in a doc as provided for in s.817.155, F.S. AVEVSTO J. Q.	ce with section 605.0203 (1) (b), Florida Statutes. I am awa sument to the Department of State constitutes a third degree		