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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP		MAIL
(Bu	usiness Entity Nam	ne)
(De	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	À



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APR 2 7020

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Honey Real Estate Properties XII 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:

Jessica Marschke (Contact Person) **Business Filings Incorporated** (Firm/Company) 8020 Excelsior Dr. Ste 200 (Address) Madison, WI 53717 (City, State and Zip Code) fulfillment@bizfilings.com E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: at (800) 981-7183 (Area Code) (Daytime Telephone Number) Jessica Marschke (Name of Contact Person) Enclosed is a check for the following amount: □\$185.00 Filing Fees, □\$180.00 Filing Fees S150.00 Filing Fees □\$155.00 Filing Fees Certified Copy, and and Certificate of and Certified Copy (\$25 for Conversion Certificate of Status & \$125 for Articles Status of Organization) MAILING ADDRESS: STREET ADDRESS: **Registration Section Registration Section Division of Corporations** Division of Corporations **Clifton Building** P. O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

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SECRETARY OF STATE

TALLAHASSEE, FL

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 \$.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Honey Real Estate Properties XII LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LLC

(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of New Jersey (Enter state, or if a non-U.S. entity, the name of the country)

11/26/2014 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:

Honey Real Estate Properties XII LLC

(Enter Name of Florida Limited Liability Company)

If not effective on the date of filing, enter the effective date:

(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

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

Page 1 of 2

Signed th	his $\underline{\partial}^{\underline{c}} \underline{\partial}^{\underline{c}}$ day of \underline{c}	February_	20 70	
		v	ted Liability/Company:	
Signatur Printed N	or Authorized Represe Jame: Luciana Caplan I Queiroz	ntative: De Argenton E	Title: <u>Manager</u>	
Signatur		<u>Business Entity:</u> [See below for required signature	:(s).]
Signature		Ky-2		
	Queiroz		Title: <u>Manager</u>	
Signature Printed N	lame		Title:	
THREET	(unite	·		
Signature Printed N	::		Title:	
Signature	3. 			
Printed N	lame:	· ····································	_ Title:	
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Printed N	Vame:		_ Title:	
Signature	u.			
Printed N	lame:			
Signature If Direct If Florid Signature If Florid Signature	a Corporation: e of Chairman, Vice Chai ors or Officers have not b la General Partnership of c of one General Partner. la Limited Partnership of es of <u>ALL</u> General Partne	een selected, an Ind or Limited Liabili or Limited Liabili	corporator must sign. ty Partnership:	
<u>All othe</u> Signatur	<u>rs:</u> e of an authorized person			
Fees:				
E C	Articles of Conversion: Fees for Florida Articles Certified Copy: Certificate of Status:	of Organization:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

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Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Honey Real Estate Properties XII LLC

(Must end with 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:	Mailing Address:
848 Brickell Avenue, Ste 1130 Miami, FL 33131	848 Brickell Avenue, Ste 1130 Miami, FL 33131

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: 202 (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.) TALLAHAR SEE, ORETARY OF STATE FEB 28 The name and the Florida street address of the registered agent are: Mr. Gustavo Havranek <u>À</u> Name è 848 Brickell Avenue, Ste 1130 \sim Florida street address (P.O. Box NOT acceptable) Miami FL 33131

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..

Zip

Registered Agent's-Signature (REQUIRED)

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(CONTINUED)

Page 1 of 2

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
MGR	Luciana Caplan De Argenton E Queiroz 1111 Kane Concourse, Suite 609 Bay Harbour, Florida 33154		
		1215 1215 1	
		FEB	i :
		28 28	,
			11: بوسید فریک
		9: 27 STAT E, FL	
(1) we attach was if a management)		ויח	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:	W It-
In accordance with section 605.0 onstitutes an affirmation under the	ember or an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true, ion submitted in a document to the Department of State provided for in s.817.155, F.S.)
Luciana Caplar	T De Argenton E Queiroz, Manager Typed or printed name of signce
Filing Fees: \$125.00 Filing Fee for Artin of Registered Ages \$ 30.00 Certified Copy (O) \$ 5.00 Certificate of Statu	ptional)