# L20000169449

(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:

Office Use Only

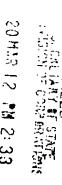


400341977944

03/12/20--01020--036 \*\*150.00

C RICO

W20000031992



## COVER LETTER

<b>TO:</b> New Filing S Division of C			•	
SUBJECT:	FAREIN	usa Co	DRP	
	(Name of Res	ulting Florida Lin	ited Company)	
	s of Conversion, Artic a "Florida Limited Li	•		ubmitted to convert an "Othe with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:		
hetica	a <u>Santos</u> (Contact Person)		_	
Account Boo	Kkeeping Cor (Firm/Company)	ρ	_	
5301 Conroy	Road 5te	40	_	
Orlando - F	L 32811 City, State and Zip Code)		_	
info @ abkco E-mail Address: (to b	rp. Com e used for future annual re	port notifications)	_	
For further information	on concerning this mat	ter, please call:		
heticia Sor (Name of Conta	ntos ct Person)		) 898 - 175 ) (Daytime Telepho	
	or the following amou a bank located in the	•	processed by this o	office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		• •
Mailing Add New Filing So Division of C P.O. Box 632	ection orporations		Street Address: New Filing Section Division of Corporate Centre of Ta	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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:
Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Corporation</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(Enter entity type: Example: corporation, infined partnership, general partnership, confinon law or business trust, etc.
First organized, formed or incorporated under the laws of Florida P180000 18364
(Enter state, or if a non-U.S. entity, the name of the country)
on <u>02/23/2018</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
FAREINUSA 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.

A	DT	$I \cap I$	E	IV
-	ĸı	w	C.	1 V -

as provided for in s.817.155, F.S.

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
·	Muller, Eduardo 13833 Bridgewater Crossings Bl
AMBR	Windermere, FL 34786
AMBR	Muller, Fabiana 13833 Bridge water (rossing Bl Windermere, FL 34786
(Use attachment if necessary)	
ICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member

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)

Signed this <u>22</u> day of <u>February</u>	20 <b>2O</b>				
Signature of Authorized Representative of Lim	ited Liability Company:				
Signature of Authorized Representative: Printed Name: Educy do Muller	Ting AMBR				
Signature(s) on bedalf of Other Business Entity:	[See below for required signature(s)]				
Signature: Printed Name: Eduardo Mule	Title: AMBR				
Signature: Printed Name:					
Printed Name:	Title:				
Signature:Printed Name:	Title:				
Signature:Printed Name:	Title:				
Signature:					
Printed Name:					
Signature:					
Printed Name:	Title:				
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.					
If Florida General Partnership or Limited Liability Partnership:					
Signature of one General Partner.					
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> 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)				

TVISION OF COURTENANCE

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(CONTINUED)