# L2000170583

(Requ	estor's Name)	
(Addro	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	#)
	,	
PICK-UP	WAIT	MAIL
(Busin	ness Entity Nam	ne)
(Docu	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ing Officer:	

Office Use Only



500346764245

08/25/20++01001-+021 \*\*150.00

2020 JUL 20 AH II: 25

Lo 10 .... 110 .... ....

. : 7, 2070 \_ : =; FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED CONVERSION FOR:

PAPEMASA LLC

PLEASE RETURN A STAMPED COPY

CHECK# 8706 FOR: \$150.00

THANK YOU!

# 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:  PAPEMASA LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
4/11/2014
4/11/2014 on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PAPEMASA 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.



•	
Signed this 23rd day of June	20 <u></u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	
Printed Name: Ashley Goldsmith	Tiste: Attorney in East
Printed Name: Ashley Goldsmin	Title: Attorney-ti-ract
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
A.m. A	
Signature: Ashley Goldsmith	This Attended in East
Printed Name: Ashley Goldsmith	Title: Attorney-in-Fact
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Clamatura.	
Signature:Printed Name:	Title
Frinted Name.	Title
Signature:	<u> </u>
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	
<u>If Florida General Partnership or Limited Liabili</u>	<u>ty Partnership:</u>
Signature of one General Partner.	
tare of the case of the state o	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
	~ · · · · · · · · · · · · · · · · · · ·

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
PAPEMASA LLC	
(Must contain the words "Limited Liability	Company, "E.L.C.," or "E.L.C.")
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
304 INDIAN TRACE #437	304 INDIAN TRACE #437
WESTON, FL 33326	WESTON, FL 33326
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
Alonso & Garcia, P.A.	
Name	
5805 Blue Lagoon Dr., Ste. 200	)
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. Thereby 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..

Ashley Goldsmith, Attorney-in-Fact
Registered Agent's Signature (REQUIRED)

Miami

City

(CONTINUED)

ARTICLE IV-

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	
MGR	Paulo A. Coellar Gonzalez
	304 INDIAN TRACE #437
	WESTON, FL 33326
President	Paulo G. Coellar Neira
	304 INDIAN TRACE #437
	WESTON, FL 33326
<del></del>	
<del></del>	
	<del></del>
(Use attachment if necessary)	
T. P. V. Odbara and March 18 and	
LE V: Other provisions, if any.	
<del></del>	<u> </u>
^	L W
REQUIRED SIGNATURE:	Lahlua -
V	· · · · · · ·

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Ashley Goldsmith, Attorney-in-Fact

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)