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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	New Filing S Division of C				
a	14	Service Construction LLC	<u>}</u>		
SUB	JECT: Masier S		sulting Florida Limi	ted Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concernin	g this matter to:		
Miche	ala Loreno Costa				
		(Contact Person)		-	
		(Firm/Company)		-	
9318	Mira Valle Ln				
		(Address)		_	
Winte	r Garden, Florida	ı 34787			
	((City, State and Zip Code)		_	
miche	la.loreno@gmail	.com			
E-1	mail Address: (to b	e used for future annual re	port notifications)	-	
For fi	urther informati	on concerning this ma	tter, please call:		
Miche	la Loreno Costa		_at (9529	194
	(Name of Conta	ict Person)	(Area Code) (Day	time Telephone Number)
		or the following amou a bank located in the		orocess	sed by this office must be payable in US
(\$25 fo & \$12.	50.00 Filing Fees or Conversion 5 for Articles anization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New I Divisi The C	Address: Filing Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Conversion For

"Other Business Entity"

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.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
	(Enter Name of Other Business Entity) General partnership (C. C. D. O. D. C.
2.	The "Other Business Entity" is a general partnership (6,90-15) (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fi	rst organized, formed or incorporated under the laws of
^"	11/30/2009
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:
M	aster Service Construction LLC
_	(Enter Name of Florida Limited Liability Company)
(T th <u>No</u> do	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 e date this document is filed by the Florida Department of State.) te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cument'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.
	20

Signed this 26th day of	of May	20
Signature of Authorized R	epresentative of Limi	ted Liability Company:
Signature of Authorized Rep	pracantativa:	
Printed Name: Silvio Costa	presentative.	Title: AMBB
Timed Name. Care Oosia		Title.
Signature(s) on behalf of O	ther Business Entity:	See below for required signature(s)
Signature (S) on Sentin or	A/	oce below for required signature(s)
Signature:		
Printed Name: Silvio Costa		Title: Owner
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Signature: [Killiau]	<u> ۲۰۰۰ - ۱۰</u>	
Printed Name: Michela Costa		Title: Owner
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:	·······	Title:
Signature:		
Printed Name:		Title:
If Florida Compandions		
If Florida Corporation: Signature of Chairman, Vice	Chairman Director or	Officer
If Directors or Officers have		
ii Directors of Officers have	not been selected, all in	corporator must sign.
If Florida General Partners	shin or Limited Liabili	ty Partnershin:
Signature of one General Par		C Tartier stip.
orginal of the contract at	uivi.	
If Florida Limited Partners	hin or Limited Liabili	ty Limited Partnership:
Signatures of ALL General F	_	
<u> </u>		
All others:		
Signature of an authorized pe	erson.	
·		
Fees:		
Articles of Conversion	on:	\$25.00
Fees for Florida Arti	cles 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 - Na	me:	
The name of the L	imited Liability Company	'is:
Manta a Cambia a Ca		
Master Service Con		ability Company, "L.L.C.," or "LLC.")
(and to the same of	and company, since, or about
ARTICLE II - Ac	·- •• ·	
ine mailing addre	iss and street address of the	e principal office of the Limited Liability Company is:
Principal Office A	Address:	Mailing Address:
9318 Mira Valle Ln		9318 Mira Valle Ln
Winter Garden, FL 3	34787	Winter Garden, FL 34787
(The Limited Liability C business entity with an		ered Office, & Registered Agent's Signature: legistered Agent. You must designate an individual or another the registered agent are:
	N	ame
	9318 Mira Valle Ln	
		P.O. Box NOT acceptable)
	Winter Garden	FL 34787
	City	Zip
	City	ΔIÞ
liability comp registered agent statutes relatin	pany at the place designate and agree to act in this ca ig to the proper and comple	nd to accept service of process for the above stated limite of in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of a sete performance of my duties, and I am familiar with and sergistered agent as provided for in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-

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

Silvio Costa

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"	Silvio Costa	
	9318 Mira Valle Ln	
	Winter Garden, FL 34787	
"MGR"	Michela Costa	
	9318 Mira Valle Ln	
	Winter Garden, FL 34787	
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		<u></u>
		AM 10: 43
(Use attachment if necessary)		Ö
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LE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
- AND STATE OF THE		
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)