# 120000219331

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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SECRETARY OF STATE
ALL AHASSEE, FLORIDA

FILED

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## **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:  J.C. MOLINA & ASSOCIATES, INC
(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.)
(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)
09/12/2005 OB
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
J.C. MOLINA & ASSOCIATES, 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



Signed t	his 30	_ day of JUNE	20 <u>20</u>
Cu .	D 4		imited/Liability Company:
Signatu	re of Author	rized Representative of L	imited/Ljability Company:
Signatur	e of Authori:	zed Representative:	1 / sur
Printed i	Name: JULIO C	MOLINA	Title: PRESIDENT
			-
Signatu	re(s) on b <mark>elga</mark>	Mr of Other Business Entity	: [See below for required signature(s)]
Signatur	e:	Deliver	Title: MGR
Printed 1	dame: JULIO C	MOLINA	Title: MGR
Drinted S	Same:		Title:
i iiiica i	vario.		Truc
Signatur	e:		
Printed ?	Name:		Title:
C'			
Signatur	U:		Title:
rrintea r	vame;		ritte:
Signatur	e:		
Printed 8	Name:		Title:
Signatur	e:	<del>-</del>	711.1
rrintea r	same:		Title:
If Florid	la Corporatio	on:	
		n. Vice Chairman, Director,	or Officer.
If Direct	ors or Officer	s have not been selected, an	Incorporator must sign.
16 (*)	l. C		114 17 4 114
	e of one Gene	<u>irtnership or Limited Liał</u> ral Partner	olity Partnership:
congridated.	e or one dene	in i armer.	
		artnership or Limited Liab	oility Limited Partnership:
Signatur	es of <u>ALL</u> Ge	eneral Partners.	
All other	re·		
	e of an author	ized nerson	
.orginatar	c or an additor	ned person.	
Fees:			
Í	Articles of Co	onversion:	\$25.00
ŀ	ees for Flori	da Articles of Organization	i: \$125.00
(	Certified Cop	y:	\$30.00 (Optional)
(	Certificate of	Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company	y is:
J.C. MOLINA & ASSOCIATES, LLC	
ARTICLE II - Address:	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8260 W. FLAGLER STREET STE 2-C MIAMI, FL. 33144	8260 W FLAGLER STREET STE 2-C MIAMI, FL.33144
(The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)  The name and the Florida street address of t	
JULIO C I	MOLINA Vame
<del></del>	P.O. Box <u>NOT</u> acceptable)
MIAMI	FL 33144
City	FL 33144 Zip
liability company at the place designate registered agent and agree to act in this cast statutes relating to the proper and complace accept the obligations of my position as	nd to accept service of process for the above stated limited ed in this certificate. I hereby accept the appointment as appacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and spregistered agent as provided for in Chapter 605, F.S  Signature (REQUIRED)

(CONTINUED)

#### ARTICLE IV-

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

"AMBR" = Authorized Member	
98.4CD# = 8.4	
"MGR" = Manager MGR Julio C Molina	9360 MLELACLED STREET STE 3 C
MGR Julio C Molina	8260 W. FLAGLER STREET STE 2-C
	MIAMI, FL. 33144
AMBR. Negui Molina	8260 W. FLAGLER STREET STE 2-C
	MIAMI, FL. 33144
	·
(Use attachment if necessary)	
.,	
CLE V: Other provisions, if any.	WA
	WHIII
CLE V: Other provisions, if any.	Mur
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	Mur
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	e with section 605,0203 (1) (b), Florida Statutes. I am aware tha
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felon TUL 10 C MOLINA

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)