# L20000234093

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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# CT CORP

## 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

8/10/2020

D	ate:	8/10/2020	972 W: CDW
	<del>\</del>	Acc#I201600000	1072 W
Name:	MANTA R	AY CAPITAL, LLC	
Document #:			
Order #:	13159237		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destinatio	ion:
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Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amoun	t:\$ 180.00	

Thank you!

## COVER LETTER

	Filing Si sion of C	ection orporations			
SUBJECT	Manta R	ay Capital, LLC			
SOBOX. II		(Name of Res	sulting Florida Limite	d Con	ipany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return	all corre	espondence concernín	g this matter to:		
	•••	(Contact Person)			
		(Firm/Company)			·
,		(Address)			
<del></del>	(0	City, State and Zip Code)			
		e used for future annual re on concerning this ma			
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(Nanı	e of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
		or the following amou a bank located in the		rocess	sed by this office must be payable in US
☐ \$150.00 Fil (\$25 for Conve & \$125 for Art of Organization	ersion icles	□\$155.00 Filing Fees and Certificate of Status	DS180.00 Filing and Centified Cop		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New Divis P.O.	Box 632	ection orporations	•	New   Divis: The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### **Articles of Conversion**

For

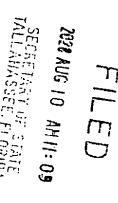
## "Other Business Entity"

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: CARIBBEAN INTERNATIONAL SERVICES CORPORATION
(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)
May 25, 2017
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:
Manta Ray Capital, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: August 10, 2020  (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 thi	is <u>10</u>	_ day of	August	20 <u>_20</u>	<del></del>
Signature	of Author	ized Repr	esentative of L	mited Lial	oility Company:
Sionature	of Authoriz	zed Represe	entative:		-
Printed Na	me: Nicola	as D. Calle	Ward	Title:	Manager
					·
Signature	(s) on beha	lf of Other	Business Entity	: ¡See belo	w for required signature(s)]
		6/	In .		
Signature:		127777	Z'		And animal Dances
Printed Na	ine: Teodore	or. Calle H	riquez	Title: _	Authorized Person
Cianatana		,			
Drinted Mo			······································	Title	
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Signature:					
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If Florida	Corporatio	<u>)11:</u>			
			irman, Director,		•
If Director	s or Officer	s have not b	seen selected, an	Incorporate	or must sign.
	<i>c</i> 1.0				
	of one Gene		or Limited Lial	muy carus	ersmp:
Signature (	or one ciene	tai Farmer.			
If Florida	Limited Pa	rtnership :	or Limited Liab	oility Limite	ed Partnership:
	of ALL Go				
-	<del></del>				
All others	<u>:</u>				
Signature (	of an author	ized person			
Fees:					
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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ability Company i	<b>J.</b>
MANTA RAY CAPITAL, LI	LC	
(Must contain	n the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:		
The mailing address and str	eet address of the	principal office of the Limited Liability Company is:
Principal Office Address:		Mailing Address:
12917 MIZNER WAY		12917 MIZNER WAY
WELLINGTON, FL 33414		WELLINGTON, FL 33414
ARTICLE III - Registere	d Agent, Register	ed Office, & Registered Agent's Signature:
(The Limited Liability Company of business entity with an active Flo	cannot serve as its owr orida registration.)	n Registered Agent. You must designate an individual or another
(The Limited Liability Company of business entity with an active Flo	cannot serve as its owr orida registration.) treet address of the	n Registered Agent. You must designate an individual or another registered agent are:
(The Limited Liability Company of business entity with an active Flo	cannot serve as its owr orida registration.)	n Registered Agent. You must designate an individual or another e registered agent are: ystem
(The Limited Liability Company of business entity with an active Flo	cannot serve as its owr orida registration.)  treet address of the  CT Corporation S	n Registered Agent. You must designate an individual or another registered agent are: ystem Name
(The Limited Liability Company of business entity with an active Flo	cannot serve as its owr orida registration.) treet address of the	n Registered Agent. You must designate an individual or another registered agent are: ystem Name
(The Limited Liability Company of business entity with an active Flo	cannot serve as its owr wida registration.)  treet address of the C T Corporation S	registered Agent. You must designate an individual or another registered agent are: ystem Name d Road dress (P.O. Box <u>NOT</u> acceptable)
(The Limited Liability Company of business entity with an active Flo	cannot serve as its owr wida registration.)  treet address of the C T Corporation S	n Registered Agent. You must designate an individual or another e registered agent are: ystem Name d Road

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..

Registered Agent's Signature (REQUIRED)

Madonna Cuddihy, Assistant Secretary

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager MGR	Nicolas D. Calle Ward
	12917 Mizner Way
	Wellington, FL 33414
	<del></del>
	<del></del>
<del></del>	
(Use attachment if necessary)	August 10, 2020
ICLE V: Effective date, if other than the effective date is listed, the date must lafter the date of filing.)	ne date of filing: August 10, 2020 (OPTIONAL) be specific and cannot be more than five business days prior to or 90 cale
ICLE VI: Other provisions, if any.	

(In accordance with section 605.0205 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Nicolas D. Calle Ward

Typed or printed name of signee

(Signature of a member or an authorized representative)

#### 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)