# L20000 38 9248

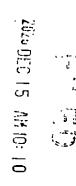
(Requ	uestor's Name)	)
(Adda	ress)	
(Addr	ess)	
(City/	State/Zip/Phor	ne #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Na	me)
(Docu	ument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



900355272599

O RICO DEC 1 5 2020



### Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 12/15/2020					#WALK	[N**
ENTITY NAME EPICC FI	ATIRON 5604 LLC	<u> </u>				
DOCUMENT NUMBER						
	**PLEASE FILE THE	E ATTACH	ED AND RETUR	PN**		
	Plain Copy Certified Copy Certificate of Status				1.1 tK	ŧ.
**Pl	EASE OBTAIN THE FO	DLLOWING I	FOR THE ABOV	E ENTITY**		
	Certified Copy of Arts Certificate of Good Sta		i lis		· .	
	**APOSTILLE' / N	IOTARIAL	CERTIFICATI	ON**		
COUNTRY OF DESTINATION NUMBER OF CERTIFICATE						
TOTAL OWED \$150.00			ACCOUNT #	#: I2016000007	72	
Please call Tina at the	above number for a	any issues	or concerns,	Thank you s	ro much!	

#### 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 EPICC FLATIRON 5604 INC.	ı is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation P20000668430  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business to	nist etc.)
First organized, formed or incorporated under the laws of	
09/02/2020 on	:
(date of organization, formation or incorporation)	1 .
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organiz EPICC FLATIRON 5604 LLC	ation:
(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 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 a 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 15 day of 14 (212)	20
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Printed Name: Rodrigo Besoy Sanchez	Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: Rodrigo Bésoy Sanchez	Title: D/P/S
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

EPICC FLATIRON 5604 LLC			
(Must contain the words "Limited)	Liability Company, "L.L.C.," or "FLC.")		
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limit	ed Liability Com	pany is:
Principal Office Address:	Mailing Address:		
304 Palermo Avenue	c/o KAUFMAN ROSSIN		
Coral Gables, Florida 33134	3310 MARY STREET, SU	ITE 501	
	MIAMI, FL 33133		
the Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	the registered agent are:		2020 DEC 15
Saidin M. Hernandez, E	sq. Name		R
	Name	. •	<del>-</del>
304 Palermo Avenue			
Florida street address	(P.O. Box <u>NOT</u> acceptable)		<b>₹</b>
Coral Gables	F1_ <sup>33134</sup>	; —-	VS 10: 1
City	Zip		. 6
Having been named as registered agent liability company at the place designaregistered agent and agree to act in this estatutes relating to the proper and compaccept the obligations of my position.  Registered Agent's	ued in this certificate. Thereby ac capacity. I further agree to comp olete performance of my duties, a	ecept the appoint bly with the provi- ind I am familiar	ment as sions of all with and

(CONTINUED)

#### ARTICLE IV-

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

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Rodrigo Besoy Sanchez
	1200 SOUTH PINE ISLAND ROAD
	PLANTATION, FL 33324
<del></del>	
(Use attachment if necessary)	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
,	
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document in a 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 the ment to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.  Rodrigo Besoy Sanchez	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felowed or printed name of signee

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