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(Req	juestor's Name)	
(Add	lress)	
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(City	//State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

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J. FASON MAR 26 2021



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COVER LETTER

TO:	New Filing S Division of C					
SURI	IECT: MILLENI	NIUM SERVICES OF DA	VIE L	.LC		
50 В	LC1	(Name of Res			ted Com	pany)
				-		d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corr	espondence concerning	g this	matter to:		
Antho	ny A. Velardi, Es	pq.				
		(Contact Person)			_	
Patric	ia Gessel, PL					
		(Firm/Company)			_	
99530	Overseas Hwy.	, Suite 2				
		(Address)			-	
Key L	argo, FL 33037					
	(1	City, State and Zip Code)			_	
antho	ny@keylargolaw	.com				
E-r	mail Address: (to b	e used for future annual re	port no	otifications)	-	
For fu	ırther informati	on concerning this ma	tter, p	lease call:		
Antho	ny A. Velardi		_at (305	_\ 453-5	3277
	(Name of Conta	act Person)		(Area Code	(Day	time Telephone Number)
		for the following amou a bank located in the			rocess	sed by this office must be payable in US
(\$25 fc & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)			180.00 Filing 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,	ection Corporations 27			New I Divisi The C	Address: Filing Section on of Corporations Sentre 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 <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: MILLENNIUM SERVICES OF DAVIE INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
October 28. 2019 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: MILLENNIUM SERVICES OF DAVIE 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.
2021 FEB 26 /

Signed this 22 nd day of February	_20 <u>21</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Ysabel Ferrera	Title: Authorized Member
Signature(s) on behalf of Other Business Entity: Signature: Signature:	
Printed Name: Ysabel Ferrera	Title: President/Director
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL 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

	RVICES OF DAVIE LLC Must contain the words "Limite	d Liability Company, "L.L.C.," or "L.L.C.")		
ARTICLE II - A	Address:			
The mailing add	ress and street address o	f the principal office of the Limited Liability Company is:		
Principal Office	Address:	Mailing Address:		
5450 S. State Road 7 #9		5450 S. State Road 7 #9		
Davie, FL 33314		Davie, FL 33314		
business entity with	an active Florida registration.)	wn Registered Agent. You must designate an individual or another of the registered agent are:		
	Ysabel Ferrera	Name		
		Name		
	Ysabel Ferrera 5450 S. State Road 7	Name		
	Ysabel Ferrera 5450 S. State Road 7	Name #9		
	Ysabel Ferrera 5450 S. State Road 7 Florida street addre	Name #9 ss (P.O. Box <u>NOT</u> acceptable)		

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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 AMBR	Ysabel Ferrera		
AMBR	5450 S. State Road 7 #9		_
	Davie, FL 33314		_
	Davie, FL 33314		-
AMBR	Maricela Ramirez		
	5450 S. State Road 7 #9		_
	Davie, FL 33314		_
			_
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(T)			
(Use attachment if necessary)		20:	
		211	
LE V: Other provisions, if any.		2021 FEB 2	
DE V. Other provisions, if any.		32	
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		**	-7
REQUIRED SIGNATURE: \	1	Ċī	-)
REQUIRED SIGNATURE:	Isabel Tappeon		-9

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)