L21000205282

<u>,</u>
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
CF STORY WOULD IN COMING STORY
<u> </u>

Office Use Only



700363045027

04/02/21--01026--021 **150.00

2021 APR - 2 PH 1: 44

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: IFS NEUTRAL MARITIME SERV	ICE LLC	
(Name of Res	ulting Florida Limite	ed Company)
The enclosed Articles of Conversion, Articl Business Entity" into a "Florida Limited Lis	_	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	
SANTIAGO RODRIGUEZ VILLAMIL		<i>C</i> .)
(Contact Person)		2
IFS NEUTRAL MARITIME SERVICE LLC		2621 E.S.3
(Firm/Company)		بين بين 1 ع 1 م
1350 NW 121 AVE, SUITE 100		
(Address)	-	PH:
MIAMI, FL 33182		
(City, State and Zip Code)		·
srvillamil@mia.ifsneutral.com		
E-mail Address: (to be used for future annual rep	port notifications)	
For further information concerning this mat	tter, please call:	
SANTIAGO RODRIGUEZ VILLAMIL	at (639-9695
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the l		rocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Conversion

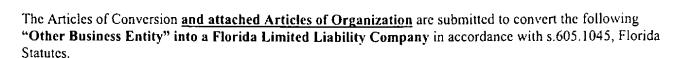
2021 APR 2 PH 144

For

"Other Business Entity"

Into

Florida Limited Liability Company



1. The name of the "Other Business Entity" immediately prior to IFS NEUTRAL MARITIME SERVICE INC	the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, g	00 00 11 6 3
First organized, formed or incorporated under the laws of	RSEY
12/05/1995 (Enter state,	or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company of the Florida Limited Liability Company of the Florida Liab	
 The name of the Florida Limited Liability Company as set forth IFS NEUTRAL MARITIME SERVICE LLC 	in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Compan	y)
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 of the date this document is filed by the Florida Department of S Note: If the date inserted in this block does not meet the applicable statutory fidocument's effective date on the Department of State's records.	date nor more than 90 calendar days after tate.)
5. The plan of conversion has been approved in accordance with a	ll 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 30TH	day of MARCH	2021
	horized Representative of Limit	ed Liability Company:
		W. Vindy J.
Signature of Auth	orized Representative:	CA 340 1
Printed Name: ROI	DRIGO VAZQUEZ RAGGIO	_ Title: MANAGER
Signature(s) on b	ehalf of Other Business Entity: [See below for required signature(s)]
	(//)	
Signature: 🗡	Work	
Printed Name: F	RODRICO VAZQUEZ RAGGIO	Title: PRESIDENT
0:		
Signature:		_ Title:
ritited Name		
Signature:		
Printed Name:		
Signature:		_ Title:
rrinted Name:		
Signature:		
Printed Name:		Title:
Signature:		Title:
FILINEU INAME	-	
If Florida Corpo	oration:	
Signature of Chair	irman, Vice Chairman, Director, or	Officer.
If Directors or Of	fficers have not been selected, an in-	corporator must sign.
If Florida Coner	al Partnership or Limited Liabili	ty Partnership:
Signature of one	General Partner.	
_		
<u>If Florida Limite</u>	ed Partnership or Limited Liabili	ty Limited Partnership:
Signatures of AL	L General Partners.	
A 11 - 4h		
All others: Signature of an ar	nthorized person.	
Olement of miles		
Fees:		
		#25.00
• • • • • • • • • • • • • • • • • • • •	of Conversion:	\$25.00 \$135.00
	Florida Articles of Organization:	\$125.00 \$30.00 (Optional)
Certified Certificat	Copy: le of Status:	\$5.00 (Optional)
Cetutica	M OT DANIES	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	imited Liability Company		
IFS NEUTRAL MARI	Ust contain the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ddress:	ne principal office of the Limited Liability Com	pany is:
Principal Office	Address:	Mailing Address:	
1350 NW 121 AVE, S	SUITE 100	1350 NW 121 AVE, SUITE 100	
MIAMI, FL 33182		MIAMI, FL 33182	
The name and the	Florida street address of t	he registered agent are:	
	N	lame	
	17		
	6303 BLUE LAGOON DRIV		
	6303 BLUE LAGOON DRIV		
	6303 BLUE LAGOON DRIV	P.O. Box <u>NOT</u> acceptable)	
	6303 BLUE LAGOON DRIV Florida street address (/E, SUITE 200	

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	RODRIGO VAZQUEZ RAGGIO
	1350 NW 121 AVE, SUITE 100
	MIAMI, FL 33182
AMBR	HECTOR TALEB
	1350 NW 121 AVE, SUITE 100
	MIAMI, FL 33182
AMBR	GUSTAVO BARCIA
	1350 NW 121 AVE, SUITE 100
	MIAMI, FL 33182
AMBR	FRANCO MERCANTE
	1350 NW 121 AVE, SUITE 100
	MIAMI, FL 33182
CLE V: Other provisions, if any.	
CLE V. Other provisions, ir any.	
CLE V. Other provisions, it any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 695.0203 (1) (b), Florida Statutes, I am aware that ment to the Dippletiment of State constitutes a third degree felor
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document in a docum	with section 605.0303 (1) (b). Florida Statutes, I am aware that

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)