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(Requestor's Name)
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PICK-UP WAIT MAIL
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T. SCOTT



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04/27/21--01027--012 **150.00



May 26, 2021

JUAN C GONZALEZ 4951 NW 84TH AVE DORAL, FL 33166

SUBJECT: PARTES Y SUMINISTROS AERONAUTICOS, INC.

Ref. Number: W21000076737

We have received your document for PARTES Y SUMINISTROS AERONAUTICOS, INC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Page 2 of articles missing and documents myst be completed in blue or black ink.,

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 421A00011363

Tyrone Scott Regulatory Specialist II New Filings Section

GOVER LETTER

TO: New Filing Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations

The enclosed Articles of Business Entity" into a	of Conversion, Artic "Florida Limited L	les of Organization, iability Company" in	and fees are submitted to convert an "Other accordance with s. 605.1045. F.S.
Please return all corresp	pondence concernin	g this matter to:	
Juan Camil	c Gonzalez		
Poules y some	(Contact Person) <u>(Alox Arlongu</u> (Firm Company)	has me	
4951 NW 641	Have (Address)		
Dord, FL, 33	3166		
E-mail Address: (to be u	State and Zip Code) 1996 Carryl sed for future annual re	port notifications)	
For further information		tter, please call:	
Santiage lepez	Person)		266 - 0659 Paytime Telephone Number)
Enclosed is a check for dollars and drawn on a l	the following amou bank located in the l	nt: (All checks proce United States)	essed by this office must be payable in US
(\$25 for Conversion ar	J\$155,00 Filing Fees nd Certificate of tatus	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
<u>Mailing Addres</u> New Filing Sect			eet Address:
Division of Corp			v Filing Section ision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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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: Poster a sommission of the prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Cotoolofton</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Florida
on 2 05/27/2014 (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 as set forth in the attached Articles of Organization: Portes y Summistics Aeronauticos 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.
PLL APR

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Parter y Summistras (Must contain the words "Limited Liability	Aggo Company, "I	actice LL	- -		
ARTICLE II - Address: The mailing address and street address of the pri	ncipal offi	ice of the Limited	d Liability C	ompany is	:
Principal Office Address:	Mailing	Address:			
4951 NW E4th ave dotal, FL 33166	4951 decal,	100 8414 V	<u> </u>		
ARTICLE III - Registered Agent, Registered (The Unimed Liability Company cannot serve as its own Registe business entity with an active Florida registration.)					
The name and the Florida street address of the re	gistered a	gent are:			
Santiage loper	Gallo				
Name	i				
4951 NW 84th a	15				
Florida street address (P.O.		acceptable)			
<u>Doral</u> City	FI.	33166			
City		Zip			
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regional Registered Agent's Signates.	this certifi ty. I furthe erformanc istered ago	cate, I hereby acc or agree to compl e of my duties, an ent as provided fo	rept the appor y with the pre ad I am famili	intment as ovisions of far with and 605, F.S	al
(CONTINU	ŒD)		LAHASSEE	APR 27 AN	

Signed this 8th day of April	_ 20_2\
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	Title: <u>registered</u> Agent
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Juan Camilo Consale?	Title: Piesident
Signature:	
Signature:Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	
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 Inc	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
<u>If Florida Limited Partnership or Limited Liabilit</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager President	Juan Camile Gonzalez
AMBR	Dolal, FL 33166 Santiago Lonez Gallo
	1951 NW EITH OVE DOIAL FL 33166
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	