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SECRETARY STATE
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D O'KEEFE JUN 1 () 2021

### **COVER LETTER**

TO: New Filing S Division of C							
SUBJECT: SELL-U	LATAM LLC						
30bjec1	(Name of Res	sulting	Florida Lim	ited Con	прапу)	<del></del>	
Business Entity" into	a "Florida Limited L	iabilit	y Compan		nd fees are submitted to accordance with s. 605		"Other
Please return all corr	espondence concernin	g this	matter to:				
MARCELA CRUZ						IAI S	<u> </u>
	(Contact Person)			-			E
PROFESSIONAL TAX	AGENTS INC						₹ ¬;
	(Firm/Company)			_		SSE I	424 PM EILEU
175 SW 7th STREET,	UNIT 2201					Tri t	21 MIY 24 PH 12: 43
	(Address)			_			$\dot{\tilde{\omega}}$
MIAMI FL 33130	· , ,					100 A	చ్
(1	City, State and Zip Code)			-			
MARCELA@PTAXAG	ENTS.COM						
E-mail Address: (to b	e used for future annual re	port no	otifications)	_			
For further informati	on concerning this ma	tter, p	dease call:				
MARCELA CRUZ		at (	954	305-	3458		
(Name of Conta	ct Person)	(	(Area Code	) (Day	time Telephone Number)	<del></del>	
	or the following amou a bank located in the			process	sed by this office must	t be payable i	n US
\$150.00 Filing Fees \$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status		180.00 Filing Certified Co	•	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status		
Mailing Add New Filing So Division of C P.O. Box 632	ection orporations 7			New I Divisi The C	t Address: Filing Section ion of Corporations Centre of Tallahassee		
Tallahassee, I	·L 32314			2415	N. Monroe Street, Sui	te 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.

SELL-U LATAM INC
(Enter Name of Other Business Entity)
The "Other Business Entity" is a CORPORATION
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
rirst organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
11/06/2019
(date of organization, formation or incorporation)
. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SELL-U LATAM LLC
(Enter Name of Florida Limited Liability Company)

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 1st day of MAY	2021 .			
Signature of Authorized Representative of Limit	ited Liability Company:			
Signature of Authorized Representative: Maria Printed Name: MARIA P ROMERO	ia Paula Romero			
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)	1		
Signature: Maria Paula Romer	$\mathcal{D}$			
Printed Name: MARIA P ROMERO	Title: OFFICER			
Signature:				
Printed Name:	Title:	<u> </u>		
Signature:				
Signature:Printed Name:	Title:	_		
Signature:				
Printed Name:	Title:			
Signature:	7.1			
Printed Name:	I itle:			
Signature: Printed Name:	Title			
	title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or 6	Officer			
If Directors or Officers have not been selected, an Inc	corporator must sign.		21	
If Florida General Partnership or Limited Liabilit	y Partnership:		Y Y H	
Signature of one General Partner.		ASSI	24	-
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:			
Signatures of ALL. General Partners.		10R	PM 12: 43	
All others:			చే	
Signature of an authorized person.	·			
Fces:				
Articles of Conversion:	\$25.00			
Fees for Florida Articles of Organization:	\$125.00			
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)			

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	anv is:				
The name of the Entitled Entering Gomps	,				
SELL-U LATAM LLC					
(Must contain the words "Limited	I Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address:					
The mailing address and street address of	f the principal office of the Limited	d Liability Company is:			
Principal Office Address:	Mailing Address:				
3325 CEDAR CREST LOOP	3325 CEDAR CREST LOO	3325 CEDAR CREST LOOP			
SPRING HILL, FL 34609	SPRING HILL, FL 34609	SPRING HILL, FL 34609			
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.)	ristered Office, & Registered Age wn Registered Agent. You must designate an i	ent's Signature: individual or another			
The name and the Florida street address	of the registered agent are:	21 AL			
PROFESSIONAL TAX AGENTS, INC.					
	Name	FILED 21 HAY 24 PH SLOKE MAN SEE!			
175 SW 7th STREET, SUITE 2201					
Florida street addre	ss (P.O. Box NOT acceptable)	25 <b>25</b> 25 2			
MIAMI	FL <sup>33131</sup>	ED PHI2: 43 EE FLORID			
City	Zip	****			

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 Signatute (REQUIRED)

(CONTINUED)

### ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
AMBR	FELIPE A. ROMERO VELEZ		
	3325 CEDAR CREST LOOP		
	SPRING HILL, FL 34609		
AMBR	INCEPTION LATAM LLC		
	3901 NW 79TH AVE SUITE 245 #1382		
	MIAMI, FL 33166		
MGR	MARIA P. ROMERO		
	3325 CEDAR CREST LOOP		
	SPRING HILL, FL 34609		
<del></del>			
(Use attachment if necessary)	HAY 24 Cincil And LAHASS		
TICLE V: Other provisions, if any.	PHI2		
	<u> </u>		

REQUIREI	SIGN	ATURE:

Maria Paula Romero

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

MARIA P. ROMERO

Typed or printed name of signee

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)