# L21000 426931

(Re	equestor's Name)		
(Ac	ldress)		
(Ac	idress)		
(Ci	ty/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(Bu	usiness Entity Nam	e)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



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1021 SEP 29 PM 3:

RECEIVED

### Sunshine State Corporate Compliance Company

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

DATE 09/29/2021		⇔WALK IN
entity name <u>PW</u>	Aventura Mobile LLC	
DOCUMENT NUMBI	ER	
	**PLEASE FILE TO	HE ATTACHED AND RETURN**
XXXXX	Plain Copy	
	Certified Copy	
	Certificate of Status	
	Certified Copy of Art Certificate of Good St	
	**APOSTILLE' / I	NOTARIAL CERTIFICATION**
COUNTRY OF DESTI	INATION	
NUMBER OF CERTIF	FICATES REQUESTED	
TOTAL OWED \$12	5,00 150.00	ACCOUNT #: I20160000072
		S R FM
Please call Tina a	at the above number kor	any issues or concerns. Thank you so much!

#### **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.

	(Enter Name of Other Business Entity)
2. The "Other Bus	iness Entity" is a Limited Liability Company  ntity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, for	med or incorporated under the laws of
April 19, 2021 on	
(date of organizati	on, formation or incorporation)
3. The name of the	Florida Limited Liability Company as set forth in the attached Articles of Organization:
PW Aventura Mobile	LLC
	(Enter Name of Florida Limited Liability Company)
(The effective date	e: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
Note: If the date inser	ment is filed by the Florida Department of State.) ted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the late on the Department of State's records.
Note: If the date inser document's effective d	ted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this 29th	day of September	20_21
Signature of Aut	horized Representative of Limi	ted Liability Company:
		mil-
Signature of Auth	orized Representative:eph Panholzer	<u> </u>
Printed Name: Jose	eph Panholzer	Title: Attorney-in-Fact
		10
Signature(s) on be		See below for required signature(s)
Signature:	any	
Printed Name: Ash	ley Goldsmith	Title: Attorney-in-Fact
Signature:		
Printed Name:	· · · · · · · · · · · · · · · · · · ·	_ Title:
Signature:		
Printed Name:	<del></del>	title:
Signature		
Printed Name:		Title:
Signature:		
Printed Name:		
Signature:		Title:
Printed Name:	<del></del>	
If Florida Corpor	ration:	
	man. Vice Chairman, Director, or	Officer.
If Directors or Off	icers have not been selected, an In	corporator must sign.
	al Partnership or Limited Liabili Canaral Partner	ty Partnersnip:
Signature of one C	general Partner.	
	<u>d Partnership or Limited Liabili</u> _General Partners.	
All others:	the colored accuracy.	
Signature of an au	tnorized person.	
Fees:		
Articles o	f Conversion:	\$25.00
•	Torida Articles of Organization:	\$125.00
Certified (		\$30.00 (Optional)
	of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION OF PW AVENTURA MOBILE LLC

#### a Florida Limited Liability Company

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

PW AVENTURA MOBILE LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

20900 N.E. 30th Avenue, Suite 807 Aventura, FL 33180

#### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Salford Corporate Services Inc. 20803 Biscayne Blvd., Suite 405 Aventura, FL 33180

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..

Salford Corporate Services Inc.

pal

By: Joseph Panholzer, Special Secretary

#### **ARTICLE IV - Management:**

The Limited Liability Company is Member-Managed. The name and address of each Member is:

Title: Name and Address:
Member Rafael Cababie Zaga

20900 N.E. 30th Avenue, Suite 807

Aventura, FL 33180

Title:

Name and Address:

Manager Moises Cababie Zaga

20900 N.E. 30th Avenue, Suite 807

Aventura, FL 33180

#### **ARTICLE V - Existence:**

pal

The Limited Liability Company's existence shall be effective September 29, 2021.

The undersigned authorized representative of a member executed these Articles of Organization on September 29, 2021.

Joseph Panholzer