

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

TO:	New Filing S Division of C				
SUBJ	ECT: CAMP	O REAL, LLC			
			sulting Florida Limite	d Con	npany)
			_		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g this matter to:		
RON	NALD C. IAC	ONE JR., ESQ.			
		(Contact Person)			
IAC	ONE LAW, P	P.A.			
		(Firm/Company)			
210	O PONCE D	E LEON BLVD., S	TE 760		
		(Address)			
COF	RAL GABLES	S, FL 33134			
•	(0	City, State and Zip Code)			
REG	ISTEREDAC	GENT@IACONEL	AW.COM		
		se used for future annual re			
For fu	nrther informati	on concerning this ma	etter, please call:		
			at (	)	
	(Name of Conta	act Person)	(Area Code)	(Day	rtime Telephone Number)
		for the following amou a bank located in the		rocess	sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add				t Address:
	New Filing S Division of C				Filing Section ion of Corporations
	P.O. Box 632	-			Centre of Tallahassee
	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 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.

2. The "Other Business Entity" is a CORPORATION  (Enter entity type. Example: corporation, limited partnership, general partnership, common	
(Enter entity type. Example: corporation, limited partnership, general partnership, comme	
	on law or business trust, etc.)
First organized, formed or incorporated under the laws of FLORIDA	
(Enter state, or it a non-O.S. entity, tik	e name of the country)
on 3/30/2021	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Art	icles of Organization:
CAMPO REAL, 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 9 the date this document is filed by the Florida Department of State.)	90 calendar days after
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	te will not be listed as the
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 apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	isal rights the amount to

Signed this 2nd day of SEPTEMBER	20 <u>21</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: carla Sabrida	riarda_
Printed Name: MARIA URDANETA	Title: MANAGER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Maria Gabriela Iráneira	
Printed Name: MARIA URDANETA	Title: DIRECTOR & PRESIDENT
Signature: Printed Name:	Tido
rimed Name.	
Signature:	
Signature:Printed Name:	Title:
Signatura	
Signature: Printed Name:	Title:
Timod Timot.	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	0.00
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	<del></del>
TO THE CITY OF THE COURT OF THE	to I include Donate ambin.
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
organization of <u>reads</u> deficient runners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ust contain the words "Limited Lia	pility Company, "L.L.C.," or "LLC.")
ARTICLE II - Ad		unical affice of the United Linkillar Common.
The mailing address	ss and street address of the	principal office of the Limited Liability Company
Principal Office A	Address:	Mailing Address:
<del>-</del>		
3400 DAVIE RD. # 302		3400 DAVIE RD. # 302
DAVIE, FL 33314		DAVIE, FL 33314
The Limited Liability Co business entity with an a		red Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another registered agent are:
The Limited Liability Cobusiness entity with an	ompany cannot serve as its own Reactive Florida registration.)	gistered Agent. You must designate an individual or another
The Limited Liability Cobusiness entity with an	ompany cannot serve as its own Reactive Florida registration.) Florida street address of the MARCO YORIS	gistered Agent. You must designate an individual or another
The Limited Liability Cobusiness entity with an	ompany cannot serve as its own Reactive Florida registration.) Florida street address of the MARCO YORIS	registered Agent. You must designate an individual or another are registered agent are:
The Limited Liability Cobusiness entity with an	ompany cannot serve as its own Reactive Florida registration.)  Florida street address of the MARCO YORIS  No. 3400 DAVIE RD. # 302	registered Agent. You must designate an individual or another are registered agent are:
The Limited Liability Cobusiness entity with an	ompany cannot serve as its own Reactive Florida registration.)  Florida street address of the MARCO YORIS  No. 3400 DAVIE RD. # 302	registered Agent. You must designate an individual or another the registered agent are:

Warto rurs' Sep 10 2022 12 2/1 EDT

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 M	ember
"MGR" = Manager	MARIA URDANETA
MGR	MARIA URDANETA
	3400 DAVIE RD. # 302
	DAVIE, FL 33314
MGR	MARCO YORIS
	3400 DAVIE RD. # 302
	DAVIE, FL 33314
MGR	MARCO A. YORIS URDANETA
	3400 DAVIE RD. # 302
	DAVIE, FL 33314
(Use attachment if necessal USE V: Other provisions, if	
DECLUDED CICNATU	
<u>REQUIRED</u> SIGNATUI	Œ:
Garia Gabriela Urdaneta	1 <del></del>
Signature of a m	ember or an authorized representative of a member
This document is executed i	n accordance with section 605.0203 (1) (b), Florida Statutes. I am awared in a document to the Department of State constitutes a third degree

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)