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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Millanti, LLC		
(Nam	ne of Resulting Florida Limit	ed Company)
The enclosed Articles of Conversion Business Entity" into a "Florida Lim	n. Articles of Organizationited Liability Company	on, and fees are submitted to convert an "Other" in accordance with s. 605,1045, F.S.
Please return all correspondence cor	ncerning this matter to:	
Frank C. Miranda		
(Contact Person	n)	
Frank Charles Miranda, P.A.		
(Firm/Compan	y)	
3226 W. Cypress St		
(Address)		
Tampa, FL 33607		
(City, State and Zip	Code)	
frank@fcmlaw.com		
E-mail Address: (to be used for future a	annual report notifications)	
For further information concerning	this matter, please call:	
Frank Miranda	at (⁸¹³	254-2637
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the followin dollars and drawn on a bank located		processed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)		
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

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Millanti Corporation
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
January 22, 2014 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Millanti, 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.

Certificate of Status:

\$5.00 (Optional)

2121 OC: 19 FF 10: C

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Na	ame: Limited Liability Comp	oany is:		
The name of the t	Elimited Elability Comp	Jany 13.		
Millanti, LLC				
()	fust contain the words "Limite	ed Liability Company, "L.L.C" or "LLC.")		
ARTICLE II - A	ddress:			
		of the principal office of the Limited I	Jiability Co	ompany is:
Principal Office	Address:	Mailing Address:		
7510 Amber Ct		7510 Amber Ct		
Tampa, FL 33634		Tampa, FL 33634		
			<u> </u>	
(The Limited Liability business entity with a	Company cannot serve as its c n active Florida registration.)	gistered Office, & Registered Agent own Registered Agent. You must designate an ind of the registered agent are:	ividual or anoth	her
	Iviatias ivillia	Name		
	7510 Amber Ct.	(D.O. D. NOT		
	Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)		
	Tampa	FL 33634		
	City	Zip		
liability con registered ager statutes relati	apany at the place designt and agree to act in thing to the proper and coobligations of my position. Registered Agen	nt and to accept service of process for gnated in this certificate, I hereby accept is capacity. I further agree to comply complete performance of my duties, and on as registered agent as provided for int s Signature (REQUIRED)	pt the appoi with the pro I am famili	intment as ovisions of al iar with and
			- ·	

ARTICLE IV-

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

"AMBR" = Manager MGR	Title:	Name and Address:	
MGR Matias Milla 7510 Amber CT Tampa, FL 33634 (Use attachment if necessary) CLE V: Other provisions, if any. REQUIRED SIGNATURE: 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 any false information submitted in a document to the Department of State constitutes a third degree fe	"AMBR" = Authorized Member		
(Use attachment if necessary) CLE V: Other provisions, if any. REQUIRED SIGNATURE: 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 any false information submitted in a document to the Department of State constitutes a third degree fe	<u> </u>	AA A' ABUU	
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any false information submitted in a document to the Department of State constitutes a third degree fe	Muliano		
as provided for in s.817.155, F.S.	Signature of a member of	r an authorized representative of a member	
	Signature of a member of This document is executed in accordance	r an authorized representative of a member	re t

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)