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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. (CORPORATE NAME)	nechanical Corp	P1700096849 (DOCUMENT#)
2. (CORPORATE NAME)		(DOCUMENT #)
3. (CORPORATE NAME)		(DOCUMENT#)
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New Filings	Amendments Amendments	Other Filings Annual Report
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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

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:

OASIS MECHANICAL CORP
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION P170000888 96849
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
12/06/2017 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization OASIS MECHANICAL 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 afte 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 cartifled under see 605, 1006 and 605, 1061-605, 1072. F.S.



Signed this 3	day of NOVEMBER	2021 .	
Signature of Autho	rized Representative of	Limited Liability Com	ipany:
Signature of Authori Printed Name: JORGI	zed Representative: Q/ EL. ENRIQUEZ	/a/ Jorge L (n Title: AMBR	iniquez
Signature(s) on beha	alf of Other Business Ent	tity: See below for requ	uired signature(s)]
Signature: Q /a/	Jorge L. Enrique	3	
Signature: 2/4/7 Printed Name: THALI	Thalia Chriguez	Title: S	
Signature: Q/4/ P Printed Name: PETER	Peter A. Majwell RA. MAXWELL	Title: V	
Signature:		Titio	
Signature: Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
	on: n, Vice Chairman, Directors have not been selected,		n.
If Florida General P Signature of one Gene	artnership or Limited Lacral Partner.	iability Partnership:	
If Florida Limited P Signatures of ALL G	artnership or Limited Li eneral Partners.	iability Limited Partner	ship:
All others: Signature of an author	rized person.		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	ny is:
OASIS MECHANICAL LLC	
(Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
914 N M ST	
LAKE WORTH, FL 33460	SAME
	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another f the registered agent are:
	The regionated agent are.
JORGE L. ENRIQUEZ	
	Name
914 N M ST	
Elorida street address	(P.O. Box NOT acceptable)

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 Signature (REQUIRED)

LAKE WORTH

City

(CONTINUED)



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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	JORGE L. ENRIQUEZ
	914 N M ST
	LAKE WORTH, FL 33460
AMBR	THALIA ENRIQUEZ
	914 N M ST
	LAKE WORTH, FL 33460
AMPE	DETEC A MANAGER
AMBR	PETER A. MAXWELL
•	914 N M ST
	LAKE WORTH, FL 33460
	
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CLE V: Other provisions, if any. REQUIRED SIGNATURE:	
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	2/a/ Jorge L Firiquez
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	I/s/ Jorge L (Tiriquez
CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document in	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware that