# L2200005089

(Re	equestor's Name)	
1		
(Ac	ddress)	
(Ac	ldress)	
(CI	ty/State/Zip/Phone #)	
PICK-UP		L
(Bu	usiness Entity Name)	
(De	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
	Office Use Only	

5

200378311442

12/28/21--01008--016 \*\*150.00

FILED DIVISION OF CODPORATIONS 21 DEC 28 AM IO: 55



#### **COVER LETTER**

### **TO:** New Filing Section

Division of Corporations

SUBJECT: \_\_\_\_\_

LAVOLA HOLDINGS LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

OLGA KALYANOVA

(Contact Person)

THE FINKELSHTEYN GROUP P.A.

(Firm/Company)

134 S DIXIE HWY., SUITE 201

(Address)

HALLANDALE, FL 33009

(City, State and Zip Code)

olga@tfgcpa.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

 OLGA KALYANOVA
 at (305)
 931 9212

 (Name of Contact Person)
 (Area Code)
 (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

📕 \$150.00 Filing Fees	□\$155.00 Filling Fees	□S180.00 Filing Fees	□\$185.00 Filing Fees.
(\$25 for Conversion	and Certificate of	and Certified Copy	Certified Copy, and
& \$125 for Articles	Status		Certificate of Status
of Organization)			

#### Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



<u>Articles of Conversion</u> For <u>"Other Business Entity"</u> Into <u>Florida Limited Liability Company</u>

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: LAVOLA HOLDINGS LLC

(Enter Name of Other Business Entity)

LIMITED LIABILITY COMPANY

2. The "Other Business Entity" is a \_\_\_\_\_

(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)

09/23/2013 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:

LAVOLA HOLDINGS LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date:  $0(-0)/(-z_0) \ge 2$ 

(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.)

<u>Note:</u> 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.

Signed this 30 day of NOVEMBER 20 21				
Signature of Authorized Representative of Limited Liability Company:				
Signature of Authorized Representative:				
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]				
Signature:				
Signature: Title: Title:				
Signature: Printed Name: Title:				
Signature: Printed Name: Title:				
Signature: Printed Name: Title:				
Signature: Printed Name: Title:				
If Florida Corporation: Signature of Chairman. Vice Chairman. Director. or Officer. If Directors or Officers have not been selected. an Incorporator must sign.				
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.				
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of <u>ALL</u> General Partners.				
All others: Signature of an authorized person.				
Fees:				
Articles of Conversion:\$25.00Fees for Florida Articles of Organization:\$125.00Certified Copy:\$30.00 (Optional)Certificate of Status:\$5.00 (Optional)				

· ,



#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

LAVOLA HOLDINGS 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:			
3370 NE 190TH STREET, # 714	3370 NE 190TH STREET, # 714			
MIAMI, FL 33180	MIAMI, FL 33180			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: THE FINKELSHTEYN GROUP P.A.				
THE FINKELSHTEYN GROUP P.A. Name				
	55 S			
134 S DIXIE HWY., SUITE 20	1			
Florida street address (P.O.	. Box <u>NOT</u> acceptable)			
	20200			

HALLANDALE	FL 33009
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 registered agent as provided for in Chapter 605, F.S.

The Chillen

Registered Agent's Signature (REQUIRED)

#### ARTICLE IV-

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 MGR

.

MANTAS Kudpinas 3370 NE 190TH STREET, # 714

\_\_\_\_\_

3370 NE 1901H STREET, # 714 MIAMI, FL 33180

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

**REQUIRED SIGNATURE:** Maus 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. PinAS (Jug NHAS KUDRINAS **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)



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "LAVOLA HOLDINGS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "LAVOLA HOLDINGS, LLC" IS A SERIES LIMITED LIABILITY COMPANY.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED;

CERTIFICATE OF FORMATION, FILED THE TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2013, AT 9:22 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.



Authentication: 204835132 Date: 12-01-21

5402903 8315

SR# 20213927473 You may verify this certificate online at corp.delaware.gov/authver.shtml Page 1

## Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "PRIVE 703S, LLC" HAS FILED THE FOLLOWING DOCUMENTS:

CERTIFICATE OF FORMATION, FILED THE NINETEENTH DAY OF MAY, A.D. 2014, AT 10:40 O'CLOCK A.M.

CERTIFICATE OF RESIGNATION OF REGISTERED AGENT WITHOUT APPOINTMENT, FILED THE FIRST DAY OF APRIL, A.D. 2021, AT 3:20 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "PRIVE 703S, LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRIVE 703S, LLC" WAS FORMED ON THE NINETEENTH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Authentication: 204837593 Date: 12-01-21

Page 1

5535684 8340 SR# 20213927963

You may verify this certificate online at corp.delaware.gov/authver.shtml