# 02200063351

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

Check

TO: New Filing Section Division of Corporations

SUBJECT: Select Miami, 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:

| Mario Roitman   |   |                                |             |  |    |
|---|---|--------------------------------|-------------|--|----|
|   | (Contact Person)                                      |                                | _           |  |    |
| Select Model Managen  | nent USA Holding, Inc                                 |                                |             |  |    |
|   | (Firm/Company)  |                                | _           |  |    |
| 1001 Brickell Bay Drive   | e, Ste 2402   |                                |             |  |    |
|   | (Address)   |                                | <del></del> |  |    |
| Miami, Florida 33131  |   |                                |             |  |    |
| ((  | City, State and Zip Code)                             |                                | _           |  |    |
| roitman@silvainternati  | onal.com  |                                |             |  |    |
| E-mail Address: (to b   | e used for future annual re                           | port notifications)            |             |  |    |
| For further informati   | on concerning this ma                                 | tter, please call              | :           |  |    |
| Mario Roitman   |   | at ( <sup>305</sup>            | )547-9      | 9142   |    |
| (Name of Conta  | act Person)   | (Area Coc                      | e) (Day     | rtime Telephone Number)  |    |
|   | For the following amount a bank located in the        |                                | process     | sed by this office must be payable in                            | US |
| S150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | ☐\$155.00 Filing Fees<br>and Certificate of<br>Status | □\$180.00 Filinand Certified C |             | ■\$185.00 Filing Fees. Certified Copy, and Certificate of Status |    |

#### 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



January 31, 2022

MARIO ROITMAN 1001 BRICKELL BAY DR STE 2402 MIAMI, FL 33131

SUBJECT: SELECT MIAMI, LLC Ref. Number: W22000009981

We have received your document for SELECT MIAMI, LLC and your check(s) totaling \$185.00. However, the document has not been filed and is being retained in this office for the following:

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 622A00002412

Jessica A Fason Regulatory Specialist II

## **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:  |
|---|
| Select Miami, Inc.  (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)   |
|   |
| October 18, 2010 on   |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:   |
| Select Miami, 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.  |

| Signed this        | day of December   | 20                                     |
|--------------------|---|--|
| Signature of Au    | thorized Representative of Lim  | ited Lighility Company                 |
|                    | 20  |  |
| Signature of Aut   | horized Representative: #\\ \( \frac{\partial U_{\partial}}{2} \)           | <u></u>                                |
| Printed Name: Ma   | tteo Puglisi  | Title: Manager                         |
| (Signatura(s) on 1 | habalf of Other Dusiness Entities   | IS as below for magnined signaturated. |
|                    |   | See below for required signature(s)    |
| Signature:         |   | Title: VP                              |
| Printed Name: Bri  | dget Hala/ski   | Title: VP                              |
| Signatura          |   |  |
| Printed Name:      |   | Title:                                 |
|                    |   |  |
| Signature:         |   | Title:                                 |
| Printed Name:      |   | Title:                                 |
| Signature:         |   |  |
| Printed Name:      |   | Title:                                 |
|                    |   |  |
| Signature:         |   |  |
| Printed Name:      |   | Title:                                 |
| Signature:         |   |  |
| Printed Name:      |   | Title:                                 |
|                    |   |  |
| If Florida Corpo   |   | 066                                    |
| _                  | irman, Vice Chairman, Director, or<br>fficers have not been selected, an In |  |
| II Directors of Or | ricers have not been selected, all in                                       | corporator must sign.                  |
| If Florida Gener   | al Partnership or Limited Liabili   | ty Partnership:                        |
| Signature of one   | General Partner.  |  |
| If Florida Limit   | <u>ed Partnership or Limited Liabili</u>                                    | ty Limited Dartnarchine                |
|                    | <u>L</u> General Partners.  |  |
|                    | <u> </u>  |  |
| All others:        |   |  |
| Signature of an a  | uthorized person.   |  |
| Fees:              |   |  |
| Articles of        | of Conversion:  | \$25.00                                |
|                    | Florida Articles of Organization:   | \$125.00                               |
| Certified          | <del>-</del>  | \$30.00 (Optional)                     |
| Certifica          | te of Status:   | \$5.00 (Optional)                      |

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Select Miami, I |  | nited Liability Company, "L.L.C.," or "LLC.")   |            |
|-----------------|--|---|------------|
|                 | (Was comain the words 15)  | area Elability Company, 15.15.C., Or Elec. 7  |            |
| ARTICLE II      |  |   |            |
| The mailing a   | iddress and street addres  | s of the principal office of the Limited Liability Co   | mpany is:  |
| Principal Of    | fice Address:  | Mailing Address:  |            |
| 1665 Washing    | ton Ave  | 1665 Washington Ave   |            |
| 3rd Floor       |  | 3rd Floor   |            |
| Miami Beach, I  | FL 33139   | Miami Beach, 33139  |            |
| •               | ith an active Florida registration   | s own Registered Agent. You must designate an individual or anoth.) ss of the registered agent are: | re:<br>ner |
| •               | ith an active Florida registration   | .)  |            |
| •               | oith an active Florida registration  I the Florida street addre  | .)  |            |
| •               | oith an active Florida registration  I the Florida street addre  | ss of the registered agent are:  Name   |            |
| •               | th an active Florida registration  I the Florida street addre  Mario Roitman  1001 Brickell Bay C                            | ss of the registered agent are:  Name   |            |
| •               | th an active Florida registration  I the Florida street addre  Mario Roitman  1001 Brickell Bay C                            | Name rive, Ste 2402  Iress (P.O. Box NOT acceptable)  FL 33131                                      |            |
| •               | th an active Florida registration  If the Florida street address  Mario Roitman  1001 Brickell Bay D  Florida street address | Name rive, Ste 2402  Iress (P.O. Box NOT acceptable)  FL 33131                                      |            |

(CONTINUED)

Registered Agent's Signature (REQUIRED)

#### ARTICLE IV-

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

| ss:              |
|------------------|
|                  |
|                  |
| ve, 3rd Floor    |
| 1139             |
|                  |
| ve, 3rd Floor    |
| 139              |
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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.

Matteo Puglisi

Typed or printed name of signee