122006933

| (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: |
| , , |
| |
| İ |
| |
| |
| |
| |

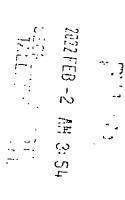




100379573461

02/02/22--01009--030 **150.00

2/18/12



INHS11 (7/17)

COVER LETTER

| UBJECT: BR PAVEF | S DESIGN LLC | | | | _ | |
|------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------|-------------------------|------------|
| | (Marine Controller | ting Florida Lim | | | | |
| usiness Entity" into a | of Conversion, Article | omiy compa | - , | fees are submitted to ordance with s. 605.1 | convert as 045, F.S. | n "Other |
| lease return all corres | pondence concerning | | | | | |
| ANIUSKA DA SILVA | | | | | | |
| | (Contact Person) | . - | | | | |
| AQUI SOLUTIONS, LLC | · | | | | | |
| | (Firm/Company) | | | | | |
| 2500 12TH ST | | | | | | |
| | (Address) | | | | | |
| SARASOTA, FL 34237 | | | | | | |
| | ity, State and Zip Code) | | | | | |
| YANI.AQUISOLUTION | | | | | | |
| F-mail Address: (to be | used for future annual rep | port notifications |) | | | |
| | on concerning this mat | | | | | |
| | | 0/11 | . 957-8 | 3488 | | |
| EDWALD GUEDES FI | | _at (| de) (Day | itime Telephone Number) | | |
| (Name of Conta | ct Person) | | | | | olo in US |
| Enclosed is a check f dollars and drawn on | or the following amou a bank located in the | mt: (All check United States | s process) | sed by this office mus | t ne payat | ne in oo |
| \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | ☐\$155.00 Filing Fees and Certificate of Status | S180.00 Fi and Certified | Сору | ☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status | | |
| Mailing Add New Filing S Division of C P.O. Box 633 | ection Corporations | | New Divis The 9 2415 | et Address: Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Schassee, FL 32303 | ite 810 | 7922FEB -2 |

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: BR PAVERS DESIGN 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. |
| (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) |
| 12/05/2016 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: |
| BR PAVERS DESIGN 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 27TH day of JANUARY | 20 | | | |
|--------------------------------------------------------------------------------------|-----------------------------------------------|----------------|--------------------------|----------------------------------------|
| | | | | |
| Signature of Authorized Representative of Limite | <u>, , , , , , , , , , , , , , , , , , , </u> | | | |
| | | | | |
| Signature of Authorized Representative:EBBD432E2BB Printed Name: EDWALD GUEDES FILHO | Title: PRESIDENT | | | |
| | | | | |
| Signature(s) on behalf of Other Business Entity: [See Signature: | e below for required signature(s) | | | |
| Signature: Levi | MIL PRESIDENT | | | |
| Signature: | Title: TRESIDENT | | | |
| | | - | | |
| Signature:Printed Name: | Title: | • | | |
| | | | | |
| Signature: Printed Name: = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = | Title | | | |
| Printed Name: | - HUC | - — | | |
| Ciamoturo: | | - | | |
| Signature:Printed Name: | Title: | - | | |
| | | | | |
| Signature:Printed Name: | mist | - | | |
| Printed Name: | Title: | _ | | |
| | | | | |
| Signature:Printed Name: | Title: | _ | | |
| Printed Name: | - | | | |
| If Florida Corporation: | | | | |
| col i was Vias Chairman Director of | Officer. | | | |
| If Directors or Officers have not been selected, an Inc | orporator must sign. | | | |
| | | | | |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner. | | | | |
| - | | | | |
| If Florida Limited Partnership or Limited Liabilit | y Limited Partnership: | | | |
| Signatures of ALL General Partners. | | | | |
| _ | | | | |
| All others: | | | | |
| Signature of an authorized person. | | | | |
| Fees: | | | | |
| rcs. | | | | |
| Articles of Conversion: | \$25.00 | | | |
| Fees for Florida Articles of Organization: | \$125.00 | —1; · | 203 | |
| Certified Copy: | \$30.00 (Optional) \$5.00 (Optional) | ? : ! `` | | ************************************** |
| Certificate of Status: | 55.00 (Optionar) | :! | 0 | ± 'j |
| | | | 10 | ٠, |
| | | | | |
| | | | 12. | • • |
| | | | $\langle \omega \rangle$ | |

| ARTICLES OF ORGANI | ZATION FOR I | FLORIDA LIMITED LIA | BILITY COMPANY |
|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| ARTICLE I - Name: The name of the Limited Li | ability Company | is: | |
| BR PAVERS DESIGN LLC | ne words "Limited Liab | oility Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - Address: | | | |
| The mailing address and str | ect address of the | principal office of the Limite | ed Liability Company is: |
| Principal Office Address: | | Mailing Address: | |
| 2807 GREENBRIAR ST | - | 2807 GREENBRIAR_ST | · |
| SARASOTA, FL 34237 | | SARASOTA, FL 34237 | |
| | | | |
| (The Limited Liability Company can business entity with an active Florida St.) The name and the Florida St. | not serve as its own Re la registration.) | red Office, & Registered Aggistered Aggistered Agent. You must designate and registered agent are: | i individual or another |
| AOLU SC | DLUTIONS, LLC | | |
| Adorse | | inic | |
| | | | |
| | TH STREET | P.O. Box NOT acceptable) | |
| | | | |
| SARASO | | FL 34237 | |
| | City | Zip | |
| liability company at th registered agent and agre statutes relating to the p | e place designated e to act in this cap roper and comple | d to accept service of process of in this certificate. I hereby a pacity. I further agree to compute performance of my dutics, a registered agent as provided | ecept the appointment as ply with the provisions of all and I am familiar with and |
| Reg | | Signature (REQUIRED) INUED) | Z022 FEE |
| | (00 | <i></i> | |
| | | | |
| | | | 二章 |

| Title: | Name and Address: |
|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| "AMBR" = Authorized Member | |
| "MGR" = Manager MGR | EDWALD GUEDES FILHO |
| NIGN | 2807 GREENBRIAR ST |
| | SARASOTA FL 34237 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | - |
| (Use attachment if necessary) | |
| | |
| CLE V: Other provisions, if any. | |
| CEL V. Other provincian, in any | |
| | |
| | |
| REQUIRED SIGNATURE: | |
| -271- | |
| | |
| Signature of a member o | r an authorized representative of a member |
| This document is executed in accordan | ce with section 605.0203 (1) (b), Florida Statutes, I am a cument to the Department of State constitutes a third degree |
| as provided for in s.817.155, F.S. | Common to the second |
| EDWALD GUEDES FILHO | |
| COWALD CHEDES FILME | Typed or printed name of signee |