| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| | | |
| (Ac | ldress) | |
| (Ac | ldress) | |
| · | · | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | isiness Entity Nan | ne) |
| | | |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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FEB 25 2022

COVER LETTER

| TO: New Filing Section Division of Corporations | |
|---|---|
| SUBJECT: ABC Pr | operty Alliance me of Resulting Florida Limited Company) |
| | on, Articles of Organization, and fees are submitted to convert an "Other mited Liability Company" in accordance with s. 605.1045, F.S. |
| Please return all correspondence co | oncerning this matter to: |
| Rober + Rui | 7_ TIL |
| ABC Property All (Firm/Company) | liance ny) |
| 7780 NW 40+h (Address) | |
| Helly wood FL (City, State and Zi | 33024 ip Code) |
| ABC proper Ly Allian E-mail Address: to be used for future | annual report notifications) |
| For further information concerning | |
| Robert Ruiz III (Name of Contact Person) | at (305) 898 - 2-343 (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following dollars and drawn on a bank located | ng amount: (All checks processed by this office must be payable in US d in the United States) |
| \$150.00 Filing Fees \$25 for Conversion & \$125 for Articles of Organization) | ng Fees |
| Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 | Street Address: New Filing Section Division of Corporations The Centre of Tallahassee |

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32314

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: |
|--|
| ABC Property Allian(L InC. (Enter Name of Other Business Entity) |
| (Enter Name of Other Business Entity) |
| |
| 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) |
| 17/12/2071 |
| on 63/03/2020 (date of organization, formation or incorporation) |
| (date of organization, formation or incorporation) |
| |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| ABC Property Alliance LLC. (Enter Name of Florida Limited Liability Company) |
| (Enter Name of Florida Limited Liability Company) |
| (Effect Fainte of Fronted Effecting 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 |
| of the contested of other tradings builty mad agreed to pay any members having appraisal rights are amount to |

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

| Signed this 2 day of January | 20_22 |
|---|--|
| Signature of Authorized Representative of Limi | |
| Signature of Authorized Representative: Printed Name: | Title: |
| Signature(s) on behalf of Other Business Entity: | [See below for required signature(s)] |
| Signature: Robert Rviz m | Title: <u>President</u> |
| Signature:Printed Name: | Title: |
| Signature: Printed Name: | |
| Signature:Printed Name: | |
| Signature:Printed Name: | |
| Signature: Printed Name: | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc. | Officer. |
| If Florida General Partnership or Limited Liabili Signature of one General Partner. | ty Partnership: |
| If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. | ty Limited Partnership: |
| All others: Signature of an authorized person. | |
| Fees: | |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

| ABC Property Al (Must contain the words "Limited Liability | |
|--|--|
| ARTICLE II - Address: The mailing address and street address of the pri | ncipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 7780 NW 40 th ST Hollywood Fl 33024 | 7780 NW 40+h ST Hollywood FL 33024 |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) | Office, & Registered Agent's Signatuse: |
| The name and the Florida street address of the reconstruction of t | |
| Florida street address (P.O. Hally Wood | th ST |

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)

(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 | |
| Wick – Manager | |
| | |
| | |
| President | Kobert KvizIII |
| | HOLLYWOOD FL 33024 |
| | |
| | - |
| | |
| | |
| | |
| | |
| (Use attachment if necessary) | |
| CLE V: Other provisions, if any. | |
| | |
| | |
| DECIDIDED SIGNATURE. | |
| REQUIRED SIGNATURE: | |
| (Cohert | Lu Lung |

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.

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)