

# L22000138845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

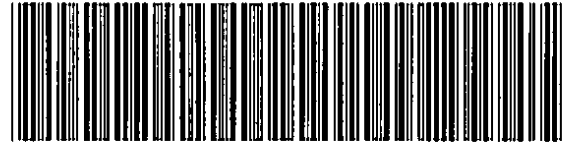
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900355674959✓

01/06/21--01007--026 \*\*50.00

01/06/21--01010--005 \*\*150.00

FILED

2022 APR -4 AM 9:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Morgan  
w/ New Art.  
4/5/22  
DC



March 22, 2021

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Attn. Daniel I O'Keefe (Regulatory Specialist II) and or "To Whom it may concern".  
Ref. Number: W21000007306

Dear Sirs:

We are writing in response to your letter dated January 25, 2021 (Letter Number: 521A00001656). Our intention was and still is to convert THE SETLIFE NETWORK INC. into an LLC (SETLIFE SOLUTIONS LLC).

In your letter, you state that the Florida Statutes prohibits a Florida non-profit corporation from being a party in a conversion. We reviewed the whole chapter 617 of the corporations not for profits and could not find anything related to not being a part of a conversion. Could you please provide the number of the statute that indicates such a prohibition?

After several calls to the Florida Department of State Division of Corporations Ph. 850 245-6052 and having left several messages asking for help on how to proceed with this matter, we have not received any answer at all. It is within this circumstance that we hope this letter complies with your request of answering within 60 days for our filing not to be considered abandoned so we can avoid having to re-submit another \$150 filing fee to complete the conversion.

Sincerely Yours,  
Oscar Lafarga  
The SetLife Network

A handwritten signature in black ink, appearing to read 'Oscar Lafarga', written over the printed name.

P.S.: Find attached a copy of your letter and the document for the filing



March 17, 2022

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

To whom it may concern,

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. Note that the filing fee has already been sent as part of a previous correspondence that we have not yet received an answer for. Attached is a copy of all previous communications about this matter.

We had submitted this same form earlier this year with the correct filing fee and received a response from a Regulatory Specialist (Letter Number: 521A00001656) citing a failure to process the conversion, but the reasons given are not consistent with the Florida Statutes.

We are again submitting this conversion of the non-profit corporation (THE SETLIFE NETWORK INC.) into an LLC (SETLIFE SOLUTIONS LLC) to be processed since it is an eligible entity according to chapter 617 of the corporations not for profits.

To provide additional context, THE SETLIFE NETWORK INC. was incorporated as a non-profit and an application for tax-exempt status (Form 1023) was later filed with the IRS. This application was not processed successfully and the company did not obtain a tax-exempt status. Therefore the company has since operated as a for-profit corporation complying with all federal tax obligations. Since there is no longer any effort or process to obtain tax-exempt status, this company should be converted to a Florida LLC.

Please let me know if you need any other information to process this conversion.

Thanks,

Oscar Lafarga  
President

**People over profit.**

[contact@setlife.network](mailto:contact@setlife.network)

[www.setlife.network](http://www.setlife.network)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 25, 2021

OSCAR LAFARGA  
THE SETLIFE NETWORK INC  
300 FARMINGTON DR  
PLANTATION, FL 33324

SUBJECT: SETLIFE SOLUTIONS LLC  
Ref. Number: W21000007306

We have received your document for SETLIFE SOLUTIONS LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes prohibits a Florida non-profit corporation from being a party in a conversion. A Florida non-profit corporation may be a party in a merger; however, the Florida non-profit corporation must be the surviving entity.

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.

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 521A00001656

*Cannot convert  
Non-profit into  
LLC.*

RECEIVED  
2021 MAR 29 PM 1:50  
OPERATIONS  
SPECIAL  
SERVICES

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: SETLIFE SOLUTIONS LLC.  
Name of Surviving Party

The enclosed Certificate of Merger and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Oscar Lafarga  
Contact Person

Setlife Solutions LLC  
Firm/Company

300 Farmington Dr.  
Address

Plantation, FL 33317  
City, State and Zip Code

oscar@setlife.network  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Victor Lafarga at ( 954 ) 663 8260  
Name of Contact Person Area Code Daytime Telephone Number

☐ Certified copy (optional) \$30.00

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**Articles of Merger  
For  
Florida Limited Liability Company**

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, Florida Statutes.

**FIRST:** The exact name, form/entity type, and jurisdiction for each merging party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
THE SETLIFE NETWORK INC	FLORIDA	CORP. N. 7-13369
LAFATECH SOLUTIONS LLC	FLORIDA	LLC 1-2000107006
_____	_____	_____
_____	_____	_____

**SECOND:** The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
THE SETLIFE NETWORK LLC	FLORIDA	LLC

**THIRD:** The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FOURTH:** Please check one of the boxes that apply to surviving entity: (if applicable)

- ☐ This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.
- ☒ This entity is created by the merger and is a domestic filing entity, the public organic record is attached.
- ☐ This entity is created by the merger and is a domestic limited liability partnership or a domestic limited liability partnership, its statement of qualification is attached.
- ☐ This entity is a foreign entity that does not have a certificate of authority to transact business in this state. The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48, Florida Statutes is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FIFTH:** This entity agrees to pay any members with appraisal rights the amount, to which members are entitled under ss.605.1006 and 605.1061-605.1072. F.S.

**SIXTH:** If other than the date of filing, the delayed effective date of the merger, which cannot be prior to nor more than 90 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.

**SEVENTH:** Signature(s) for Each Party:

Name of Entity/Organization:

Signature(s):

Typed or Printed

Name of Individual:

THE SETLIFE NETWORK LLC



OSCAR LAFARGA

LAFATECH SOLUTIONS LLC



OSCAR LAFARGA

THE SETLIFE NETWORK INC



OSCAR LAFARGA

OSCAR LAFARGA

Corporations:

Chairman, Vice Chairman, President or Officer

(If no directors selected, signature of incorporator.)

General partnerships:

Signature of a general partner or authorized person

Florida Limited Partnerships:

Signatures of all general partners

Non-Florida Limited Partnerships:

Signature of a general partner

Limited Liability Companies:

Signature of an authorized person

<b><u>Fees:</u></b>	For each Limited Liability Company:	\$25.00	For each Corporation:	\$35.00
	For each Limited Partnership:	\$52.50	For each General Partnership:	\$25.00
	For each Other Business Entity:	\$25.00	<b><u>Certified Copy (optional):</u></b>	\$30.00

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

THE SETLIFE NETWORK 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:

300 FARMINGTON DRIVE

SAME

PLANTATION, FL. 33317

## 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:

OSCAR LAFARGA

Name

300 FARMINGTON DRIVE

Florida street address (P.O. Box **NOT** acceptable)

PLANTATION

FL 33317

City

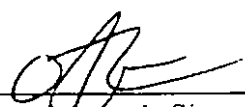
Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 APR -4 AM 9:49

FILED

*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)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

OSCAR LAFARGA

300 FARMINGTON DRIVE

PLANTATION, FL. 33317

MGR

DAVID LAFARGA

300 FARMINGTON DRIVE

PLANTATION, FL 33317

MGR

VICTOR LAFARGA

300 FARMINGTON DRIVE

PLANTATION, FL 33317

MGR

VICTORIA LAFARGA

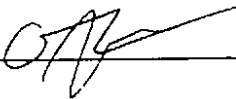
CARRER D' ALMENARA ALTA, 14 BJ 2

BARCELONA, SPAIN 08026, OC

(Use attachment if necessary)

**ARTICLE V: Other provisions, if any.**

**REQUIRED SIGNATURE:**



**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.

OSCAR LAFARGA

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)**