1846 000 801

(R	equestor's Name)	
(Ad	ddress)	
(A:	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Вс	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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05/25/22--01023--001 **185.00

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LAW OFFICES

MICHAEL ORTIZ, P.A.

1430 SOUTH DIXIE HIGHWAY
SUITE 321
CORAL GABLES, FLORIDA 33146

TELEPHONE (305) 665-5270 FACSIMILE (305) 665-1112 E-MAIL: lawortz@aol.com

May 24, 2022

By: Hand Delivered

New Filing Section
Department of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RE: Iceberg Developments Limited and Iceberg Developments LLC Client File No. 1122

Dear Sir/Madam:

I am enclosing the Articles of Conversion for Other Business Entity Into a Florida Limited Liability Company and Articles of Organization for Florida Limited Liability Company for Iceberg Developments LLC, for filing together with the copy of such Articles.

In addition, I have included a Michael Ortiz, P.A. check in the amount of \$185.00, representing the filing fee for these Articles of Conversion for Other Business Entity Into a Florida Limited Liability Company and Articles of Organization for Florida Limited Liability Company. Thank you.

1563 CAPITAL CIRCLE SE

TALLAHASSEE, FL 32301 (850) 309-7225 Very truly yours.

MICHAEL ORTIZ, P.A.

MICHAEL ORTIZ, ESQ.

COVER LETTER

	ing Section of Corporations			
SUBJECT: lce	berg Developments LLC			
	(Name of Re	esulting Florida Limite	d Company)	
The enclosed A Business Entity	rticles of Conversion, Arti " into a "Florida Limited L	cles of Organizatio Liability Company	n, and fees are submitted to con in accordance with s. 605.1045	vert an "Other , F.S.
Please return al	l correspondence concerni	ng this matter to:		
Michael Ortiz				
	(Contact Person)			
Michael Ortiz, P.	A.			
	(Firm/Company)	-		
1430 South Dixie	e Highway, Suite 321			
	(Address)			202 2
Coral Gables, FL	33146			FIL 2022 May 25
	(City, State and Zip Code)			Y 25 PI
lawortiz@aol.cor	n			3 m fr
E-mail Address	s: (to be used for future annual r	eport notifications)		PR SP
For further info	rmation concerning this ma	atter, please call:		W 25 PM 4: 00
Michael Ortiz		at (305)	665-5270	•
(Name of	Contact Person)	<u> </u>	(Daytime Telephone Number)	
	neck for the following amo yn on a bank located in the		ocessed by this office must be p	ayable in US
☐ \$150.00 Filing (\$25 for Conversio & \$125 for Articles of Organization)	n and Certificate of	□\$180.00 Filing F and Certified Copy		
New Fil Division P.O. Bo:	Address: ing Section of Corporations x 6327 see, F1, 32314	N D 1 2	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee (415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	0

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.

	(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.
Firs	st organized, formed or incorporated under the laws of
	November 9, 2010
	(date of organization, formation or incorporation)
	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
lcel	perg Developments LLC
	(Enter Name of Florida Limited Liability Company)
the	f not effective on the date of filing, enter the effective date: e effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after date this document is filed by the Florida Department of State.)
docu	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
5. T	he plan of conversion has been approved in accordance with all applicable statutes.
6. T v	he "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.
	2022 - 22 HA

Signed this day of May	20_22		
Signature of Authorized Representative of Lin			
Signature of Authorized Representative: Printed Name: Michael Ortiz	Title: AR		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature			
Printed Name: Carlos Ramon Espinosa Ceron	Title: Director		
Signature:			
Printed Name: Jorge Martin Espinosa Ceron	Title: Director		
Signature:			
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 In	corporator must sign.		
If Florida General Partnership or Limited Liabili	ty Partnershin		
Signature of one General Partner.	ty tarmersmp.		
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:		
All others:		2022 MAY	
Signature of an authorized person.		2 ₹	1
Fees:		17 25	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	S of Sivie	ED

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Iceberg Develo		iability Company, "L.L.C.," or "LLC.")	
ARTICLE II		and company to the time.	
		ne principal office of the Limited	d Liabilia. Com
5	The same interest address of the	ic principal office of the Limited	a Liability Company is:
<u>Principal Off</u>	ce Address:	Mailing Address:	
1430 South Dix	ie Highway	Same as Principal Office	
Suite 321		Jame as Finicipal Office	
Coral Gables, F ARTICLE III The Limited Liabil business entity with	- Registered Agent, Regist	ered Office, & Registered Age Registered Agent. You must designate an i	ent's Signature: ndividual or another
Coral Gables, F ARTICLE III The Limited Liabil business entity with	- Registered Agent, Registerity Company cannot serve as its own In the an active Florida registration.)	Registered Agent. You must designate an i	ndividual or another
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Coral Gables, F ARTICLE III The Limited Liabil business entity with	- Registered Agent, Registerity Company cannot serve as its own I han active Florida registration.) the Florida street address of to Michael Ortiz, P.A.	he registered agent are:	ndividual or another 2022
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Coral Gables, F ARTICLE III The Limited Liabil business entity with	- Registered Agent, Registerly Company cannot serve as its own Figure 1 active Florida registration.) the Florida street address of to Michael Ortiz, P.A. No. 1430 South Dixie Highway	he registered Agent. You must designate an i he registered agent are: ame //, Suite 321	ndividual or another
Coral Gables, F ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Registerly Company cannot serve as its own Enhancetive Florida registration.) the Florida street address of to Michael Ortiz, P.A. Note 1430 South Dixie Highway Florida street address (he registered agent are: ame y, Suite 321 P.O. Box NOT acceptable)	FILE

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

<u> Citle:</u>	Name and Address:	
'AMBR" = Authorized Member		
'MGR" = Manager	0.1.0	
AMBR	Carlos Ramon Espinosa Ceron	
	2601 S. Bayshore Dr., Unit 700	
	Miami, Florida 33133	
		
		
		
Use attachment if necessary)		
EV: Other provisions, if any.		2022 11/11/2
REQUIRED SIGNATURE:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Ú
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$(\ \) \ (\ \)$		
		<u>.</u>
(1)	•	;
This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am avment to the Department of State constitutes a third degree	vare thee felo
Michael Ortiz		
		_
	ped or printed name of signee	