122500237031

(R	equestor's Name)	
(Address)		
(Address)		
(C	ity/State/Zip/Phone	> #)
PICK-UP	MAIT	MAIL
(B	usiness Entity Nam	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

T. SCOTT,



800386994528

05/04/22--01016--008 **150.00



COVER LETTER

TO: New Filing S Division of C				
SUBJECT: AVIRLIN	ITERNATIONAL, LLC			
., obs. 1	(Name of Re	sulting Florida Limit	ed Con	ipany)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
JERRY P. SARESKY				
	(Contact Person)		-	
DOROT & BENSIMON	N, PL			
	(Firm/Company)		•	
20295 NE 29TH PL, S	STE 201			
	(Address)		•	
AVENTURA, FL 3318	0			
	City, State and Zip Code)		•	
CORPORATE@DOR	BENCO.COM			
E-mail Address: (to b	oe used for future annual re	port notifications)	•	
For further informati	on concerning this ma	tter, please call:		
JERRY P. SARESKY		_at (_305	921-9	1421
(Name of Conta	ict Person)	(Area Code)	(Dayı	time Telephone Number)
dollars and drawn on	a bank located in the	United States)		ed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection torporations 7		New F Division The C	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

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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.

AVIRI INTERNATIONAL CORP (Enter Name of Other Business Entity)	_·		
CORPORATION			
2. The "Other Business Entity" is a			
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	on law or busi	ness trust,	, etc.)
First organized, formed or incorporated under the laws of PANAMA (Enter state, or if a non-U.S. entity, the	e name of the	country)	
09/05/1986 on .			
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Art	icles of Org	ganizatio	on:
AVIRI INTERNATIONAL, 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 9 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 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 appraisable which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	sal rights ^s tho	இ <mark>ற்</mark> றவள் ் :	t to .
		.	
	·	en Hij	

Signed this 15TH day of APRIL	2022
Signature of Authorized Representative of Lin	nited Lashility Company
	// 17
Signature of Authorized Representative:	Halld
Printed Name: ALBERT MAYER TOLEDANO MAM	AN Title: MANAGER
Signature(s) on behalf of Other Business Entity:	[Con holon 6
Dusiness Entity:	[See below for required signature(s)]
Signature: / Religious Locality Printed Name: ALBERT MAYER TO FORNO MAMA	_
Printed Name: ALBERT MAYER TOLEDANO MAMA	N_Title: DIRECTOR
Signature: Conta le Foldance	
Printed Name: ROSA MILGRAM DE TOLEDANO	THE DIRECTOR
THE PARTY OF THE P	Title: DIRECTOR
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	m: 1
Printed Name:	I itle:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
remain a	
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ity Partnership:
organical of the deficial rather.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
All othors	
All others: Signature of an authorized person.	
organicate of an additionized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
AVIRI INTERNATIONAL, LLC	
(Must contain the words "Limited Liabilit	(y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
19333 Collins Avenue #2110	19333 Collins Avenue #2110
Sunny Isles Beach, FL 33160	Sunny Isles Beach, FL 33160
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the interest and interest address of the interest address.	tered Agent. You must designate an individual or another
DORBEN CORPORATE SER	 _
Name	e
20295 NE 29TH PL, STE 201	
Florida street address (P.O	. Box NOT acceptable)
Aventura	_{FL} 33180
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete accept the obligations of my position at reg	o accept service of process for the above stated limited a this certificate. I hereby accept the appointment as vity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and existered agent as provided for in Chapter 605, F.S
	•

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	ALBERT MAYER TOLEDANO MAMAN
	19333 Collins Avenue #2110
	Sunny Isles Beach, FL 33160
MGR	ROSA MILGRAM DE TOLEDANO
	19333 Collins Avenue #2110
	Sunny Isles Beach, FL 33160
MGR	ABI JACOBO TOLEDANO MILGRAN
	19333 Collins Avenue #2607
	Sunny Isles Beach, FL 33160
(Use attachment if necessary)	
(Ose attachment if necessary)	
ICI E V. Other provisions if any	
ICLE V: Other provisions, if any.	
PROTUDED STONATURE	/ //
REQUIRED SIGNATURE:	
10000 +1160	15/e//
- auction	
	and a manufactive of a member
Signature of a member or	r an authorized representative of a member

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.

ALBERT MAYER TOLEDANO MAMAN

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)