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Special Instructions to	Filing Officer:	
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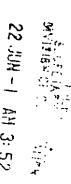
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S. CHATHAM
JUN 2 2 2022



## **COVER LETTER**

TO: New Filing Section Division of Corporations			
ARANA PAVERS LLC			
SUBJECT:(Name o	f Resulting Florida Lin	nited Company)	-
The enclosed Articles of Conversion, A Business Entity" into a "Florida Limite		-	
Please return all correspondence concer	rning this matter to	:	
ADALBERTO ARANA			27
(Contact Person) N/A		_	25 JUN 508 Y
(Firm/Company) 3905 LOCUST AVE	·,	<del></del>	<u>l</u> 3-
(Address) SARASOTA, FL 34234		_	3:52
(City, State and Zip Co ARANAPAVERS@GMAIL.COM	de)	<del></del>	
E-mail Address: (to be used for future annu	nal report notifications)	<del>-</del>	
For further information concerning this	matter, please call	:	
ADALBERTO ARANA	941 at (	685-8451	
(Name of Contact Person)		e) (Daytime Telephone Number)	-
Enclosed is a check for the following as dollars and drawn on a bank located in	•	processed by this office must b	e payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	ees \$\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{	•	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## **Articles of Conversion**

For

# "Other Business Entity"

Into

## Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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:  ARANA PAVERS INC
(Enter Name of Other Business Entity)
CORPORATION (INC)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) FLORIDA
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
04/29/2021
on .
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  ARANA PAVERS 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 locument's effective date on the Department of State's records.
The plan of conversion has been approved in accordance with all applicable statutes.
. 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	day of MAY	20
Signature (	of Authorized Representative of Li	mited Liability Company:
		11 1 1 -10
Signature o	f Authorized Representative:	CERTO CATONCE
Printed Nan	ne: ADALBERTO ARANA	Title: MGR
		[See below for required signature(s)]
Signature:	Aboltedo Amore	Title: PRESIDENT
Printed Nan	ne: ADALBERTO ARANA	Title: PRESIDENT
Signature:		
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<u>If Florida (</u>	Corporation:	
_	f Chairman, Vice Chairman, Director, e	
If Directors	or Officers have not been selected, an	Incorporator must sign.
de l'alle de la co	Osar and Dankaran Etra and Etrata di Etra	Man Danier and San
	<u>General Partnership or Limited Liab</u> f one General Partner.	mty rartnersmp:
nghatine of	Tone General Farther.	
f Florida I	<u>imited Partnership or Limited Liab</u>	ility Limited Partnership:
	of ALL General Partners.	<del></del>
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<u>all others:</u>		
ignature of	f an authorized person.	
2222		
<u>ces:</u>		
Arti	cles of Conversion:	\$25.00
	s for Florida Articles of Organization	
	tified Copy:	\$30.00 (Optional)
	tificate of Status:	\$5.00 (Optional)

2 JUN - 1 AM 3:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

. DOLGE D. L. N.				
ARTICLE I - Name: The name of the Limited	Liability Company i	ie.		
THE Name of the Elimited	Elability Company	15.		
ARANA PAVERS LLC				
(Must contai	n the words "Limited Liab	ility Company, "L.L.C.," or "	·LLC.")	
ARTICLE II - Address:				
		principal office of the	Limited Liability Compa	any is:
Principal Office Addres	<u>s:</u>	Mailing Address	<u>ı:</u>	
3905 LOCUST AVE		3905 LOCUST AVE	<b>-</b>	
SARASOTA, FL 34234		SARASOTA, FL 34		
ARTICLE III - Register (The Limited Liability Company of business entity with an active Flo	annot serve as its own Rep			
·				
The name and the Florida	street address of the	e registered agent are:		
ADALI	BERTO ARANA			
	Nai	me	<del></del>	
<del></del>	OCUST AVE			
	•	O. Box NOT accepta	ble)	
SARAS	SOTA	34234 FL		
<del></del>	City	Zip	<del></del>	
	_			
=	_		rocess for the above stated	
			reby accept the appointme	
			to comply with the provision	
			luties, and I am familiar wi ovided for in Chapter 605,	
uccepi inc oongunoi	is of my position as t	egistered agent as pro	vided for in Chapter 605,	Γ.Β
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	Obal ECAO	Arone		
R	egistered Agent's Si	gnature (REQUIRED	) &	174
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	(CONTI	NUEDI	₹ '	\$30 \$70 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$1
	(CONT.	arobb)		·

ARTICLE IV-

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

<u>Title:</u>		
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	ADALBERTO ARANA	
	3905 LOCUST AVE	
	SARASOTA FL 34234	
<del></del>		
		_ <del></del>
		<del></del>
(Use attachment if necessary)  LE V: Other provisions, if any.		
REQUIRED SIGNATURE:  Signature of a member o  This document is executed in accordance	r an authorized representative of a more with section 605.0203 (1) (b). Florida Statute	es. I am aware th
REQUIRED SIGNATURE:  Signature of a member o This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	r an authorized representative of a m	es. I am aware th
REQUIRED SIGNATURE:  Signature of a member o This document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S.  ADALBERTO ARANA	r an authorized representative of a more with section 605.0203 (1) (b), Florida Statute cument to the Department of State constitutes a	es. I am aware th
REQUIRED SIGNATURE:  Signature of a member o This document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S.  ADALBERTO ARANA	r an authorized representative of a mode with section 605.0203 (1) (b), Florida Statute	es. I am aware th