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(Re	equestor's Name)	<del></del> _
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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W22-38115



# FLORIDA DEPARTMENT OF STATE Division of Corporations

March 23, 2022

IVETTE H. LEON, ESQ. IVETTE H. LEON, P.A. 13687 SW 26 STREET MIAMI, FL 33175

SUBJECT: MILLENIUM BUILDERS LLC

Ref. Number: W22000038115

We have received your document for MILLENIUM BUILDERS 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Letter Number: 522A00006889

DANIEL L O'KEEFE Regulatory Specialist II

# **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corporation	18	
SUBJECT: MILLENIUM BUILD	ERS LLC	
SOBJECT.	(Name of Resulting Florida Limi	ted Company)
		ion, and fees are submitted to convert an "Other y" in accordance with s. 605.1045, F.S.
Please return all correspondence	ce concerning this matter to:	
Ivette H. Leon, Esq.		
(Contact	Person)	-
Ivette H. Leon, P.A.		
(Firm/Co	mpany)	-
13687 SW 26 Street		
(Add	ress)	-
Miami, Florida 33175		
(City, State ar	nd Zip Code)	-
ivette@ihllaw.com		
E-mail Address: (to be used for fu	uture annual report notifications)	-
For further information concern	ning this matter, please call:	
Ivette H. Leon, Esq.	at (	447-1020
(Name of Contact Person)	(Area Code	(Daytime Telephone Number)
Enclosed is a check for the follodollars and drawn on a bank loo		processed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	D Filing Fees S180.00 Filing and Certified Cop	
Mailing Address:		Street Address:
New Filing Section Division of Corporation	10°	New Filing Section
Division of Corporation P.O. Box 6327	18	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

# **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: MILLENIUM BUILDERS, INC.
(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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
03/24/2000 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MILLENIUM BUILDERS 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 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 which such members are entitled under ss. 605,1006 and 605,1061-605,1072. F.S.

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- S			
Signed this 3/5 day of January	20		
Signature of Authorized Depresentative	of Limited Liability Company		
Signature of Authorized Representative	of Limited Liability Company:		
Signature of Authorized Representative:	-2 .		
Signature of Authorized Representative:	Title: President		
	Entity:  See below for required signature(s)		
Signature: Malella	<del></del>		
Printed Name: Osvaldo Ochoa	Title: Manager		
Signature: Aus Olum			
Signature:	Title: Manager		
Printed Name: Carmen L. Ochoa	Title: Manager		
Signature:			
Printed Name:	Title:		
Signature:	******		
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature:	Title:		
rimed Name.	Title:		
If Florida Corporation:			
Signature of Chairman, Vice Chairman, Dire			
If Directors or Officers have not been selecte	ed, an Incorporator must sign.		
If Florida General Partnership or Limited	Liability Dautnambia		
Signature of one General Partner.	Liability Partnership:		
- G			
<u>If Florida Limited Partnership or Limited</u>	Liability Limited Partnership:		
Signatures of ALL General Partners.		EC:	
All others:		±6 >∃	
Signature of an authorized person.		SS	_
- 6		TARY OF S	-
Fees:		<u> </u>	:

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Articles of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Organization:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MILLENIUM BUIL	DERS LLC	
(	Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II	Address:	

ARTICLE I - Name:

The name of the Limited Liability Company is:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
13687 SW 26 Street	13687 SW 26 Street
Miami, Florida 33175	Miami, Florida 33175

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:

lvette H. Leon, P.A.		7 ~	<b>.</b>
	Name	782 / 282	
13687 SW 26 Street		ARK AHA	<u> </u>
Florida street address	s (P.O. Box <u>NOT</u> acceptable)	ASSE	- [
Miami	FL 33175		
City	Zip	. CR . CR .: CR	1
		- 5A ₩	>

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 Algent's Signature (REQUIRED)

(CONTINUED)

### 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	Osvaldo Ochoa		
<del>-</del>	13687 SW 26 Street		
	Miami, Florida 33175		
MGR	Carmen L. Ochoa		
<del></del>	13687 SW 26 Street		
	Miami, Florida 33175		
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ICLE V: Other provisions, if any.		-	$\mathbb{R}$
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		<u> </u>	30

**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, 1 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.

Osvaldo Ochoa and Carmen L. Ochoa

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)