

(Kec	questor's Name)	
(Add	iress)	
(Add	lress)	
(City	//State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	ilina Officer:	
]

Office Use Only



400389424924

06/16/22~~01007~~004 **150.00

Chapter -



COVER LETTER

TO: New Filing S Division of C			
R A ST	, RONG ENTERPRISE LL	_C	
SUBJECT:	(Name of Re	sulting Florida Limite	ed Company)
	es of Conversion, Artic	les of Organization	on, and fees are submitted to convert an "Othe" in accordance with s. 605,1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
SERGIO PONCE			
R A STRONG ENTER	(Contact Person) RPRISE LLC		
16930 SW 298TH ST	(Firm/Company) REET		
HOMESTEAD, FL 33	(Address)		
amigosfs@comcast.n	City, State and Zip Code) et		
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter please call:	
SERGIO PONCE	an emecaning and ma	305	230-8889
(Name of Conta	et Person)	_at ((Area Code)	(Daytime Telephone Number)
	or the following amou a bank located in the		rocessed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐S155.00 Filing Fees and Certificate of Status	□S180.00 Filing I and Certified Copy	
Mailing Addr New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7	; ! -	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605,1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means; a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees: \$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327

Taliahassee, FL 32314

Street Address:

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

Tallahassee, FL 32303

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605.0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)

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: BASTRONG ENTERPRISE CORP
(Enter Name of Other Business Entity) CORPORATION
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
04/29/2016
on
on
(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.

Signed this 13 day of JUNE	20_22
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representatives &	المعارضين المعارضين
Signature of Authorized Representative: 4 Printed Name: SERGIO PONCE	Title: AMBR
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: SERGIO PONCE	Title: PRESIDENT
Cimana	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature	
Signature:Printed Name:	Title:
Signature:Printed Name:	200.4
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	Office
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	corporator must sign.
The state of the s	
f Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
f Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
<u>'ees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

٠.

•

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nat The name of the L	me: imited Liability Company	is:	
R A STRONG ENT	ERPRISE LLC ust contain the words "Limited Liah	oility Company, "L.L.C.," or "L.L.	CT)
ARTICLE II - Ac			
Principal Office A	Address:	Mailing Address:	
16930 SW 298TH S		16930 SW 298TH ST HOMESTEAD, FL 33	
(The Limited Liability Co	egistered Agent, Register impany cannot serve as its own Re- active Florida registration.)		
The name and the l	Florida street address of th	e registered agent are:	
	SERGIO PONCE		
	Na	me	
	16930 SW 298TH STREE	Г	
	Florida street address (P	.O. Box <u>NOT</u> acceptable)
	HOMESTEAD	33030 FL	
	City	Zip	_

18.

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)

4	D'	r r	71	1 1	7 1	V-
~1	K		(· I	Y -

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	SERGIO PONCE
	16930 SW 298TH STREET
	HOMESTEAD, FL 33030
	
<u> </u>	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	نام المالية ال
(Use attachment if necessary) LE V: Other provisions, if any. REQUIRED SIGNATURE:	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member o	or an authorized representative of a member
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant.	or an authorized representative of a member acc with section 605,0203 (1) (b). Florida Statutes, I am aware
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordan any false information submitted in a doc as provided for in s.817.155, F.S.	or an authorized representative of a member use with section 605,0203 (1) (b). Florida Statutes, I am aware to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordan any false information submitted in a doc as provided for in s.817.155, F.S.	or an authorized representative of a member acc with section 605,0203 (1) (b). Florida Statutes, I am aware t
EV: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant any false information submitted in a document as provided for in s.817.155, F.S. SERGIO PONCE	or an authorized representative of a member use with section 605,0203 (1) (b). Florida Statutes, I am aware to the Department of State constitutes a third degree fel

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)