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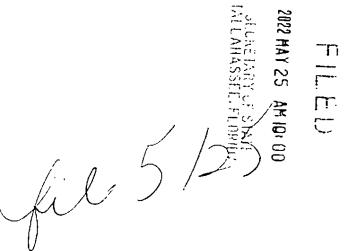
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





000388211040

05/25/22--01025--001 **150.00





COVER LETTER

TO: New Filing Section Division of Corporations	:	
SUBJECT: LAKE BOLLAS	N 660	
(Name of Resul	ting Florida Limit	ed Company)
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lial	•	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	this matter to:	
Barbara Labrador / Xiomara Polanco		
(Contact Person)		
Sanchez Vadillo LLP		
(Firm/Company)		
11402 NW 41 Street, Suite 202		
(Address)		
Doral, FL 33178		
(City, State and Zip Code)		
corporations@svlawus.com		
E-mail Address: (to be used for future annual repo	rt notifications)	
For further information concerning this matter	er, please call:	
Barbara Labrador / Xiomara Polanco	at (³⁰⁵	436-1410
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoundollars and drawn on a bank located in the U	•	rocessed by this office must be payable in US
7 -	□\$180.00 Filing and Certified Cop	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 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.

LAKE BELLA CORP
(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.
(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)
02/10/2011 on .
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:
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.)
<u>Note:</u> 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 30 day of April	_20 <u>ZZ</u>
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Printed Name: Emilia Silva-Calandriello	Title: Maruger
Signature(s) on behalf of Other Business Entity: [
Signature: Emilia-Silva-Calandriello	Title: President
Signature: Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
Signature:	
Printed Name:	little;
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	
All others: Signature of an authorized person.	
Fees:	ORIO 4

Articles of Conversion: \$25.00 \$125.00

Fees for Florida Articles of Organization: Certified Copy: \$30.00 (Optional) Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Lim	·	•	
LAKE B	sella SM	ed Liability Company, "L.L.C.," or "LLC.")	
(Must	contain the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Add	race.		
		of the principal office of the Limite	ed Liability Company is:
C			
Principal Office Ad	ldress:	Mailing Address:	
7825 NW 107 Avenue		7825 NW 107 Avenue	
Suite 401			
DORAL, FL 33178	-	DORAL, FL 33178	
(The Limited Liability Con- business entity with an act	npany cannot serve as its (live Florida registration.)	gistered Office, & Registered Agown Registered Agent. You must designate an of the registered agent are:	ent's Signature: individual or another
(The Limited Liability Combusiness entity with an act The name and the FI	npany cannot serve as its (live Florida registration.)	gistered Office, & Registered Agown Registered Agent. You must designate an of the registered agent are:	individual or another
(The Limited Liability Combusiness entity with an act The name and the FI	ipany cannot serve as its clive Florida registration.) orida street address	own Registered Agent. You must designate an	individual or another
(The Limited Liability Combusiness entity with an act The name and the Fl	ipany cannot serve as its clive Florida registration.) orida street address	own Registered Agent. You must designate an of the registered agent are: Name	individual or another
(The Limited Liability Combusiness entity with an act The name and the Fl	inany cannot serve as its crive Florida registration.) orida street address Sanchez Vadillo LLP	own Registered Agent. You must designate an of the registered agent are: Name	TALLAHASSI
(The Limited Liability Combusiness entity with an act The name and the Fl	inany cannot serve as its crive Florida registration.) orida street address Sanchez Vadillo LLP	own Registered Agent. You must designate an of the registered agent are: Name Suite 202	TALLAHASSI
(The Limited Liability Combusiness entity with an act The name and the Fl	inany cannot serve as its clive Florida registration.) orida street address Sanchez Vadillo LLP 11402 NW 41 Street. Florida street addre	own Registered Agent. You must designate an of the registered agent are: Name Suite 202 ess (P.O. Box NOT acceptable)	individual or another

(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>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
Nhe	SILVA-CALANDRIELLO, EMILIA	
	7825 NW 107 Avenue, Suite 401	
	DORAL, FL 33178	
Mar	CALANDRIELLO, MIGUEL O	
	7825 NW 107 Avenue, Suite 401	
	DORAL, FL 33178	
MAR	SILVA MADRID, MARIA	
	7825 NW 107 Avenue, Suite 401	
	DORAL, FL 33178	
(Use attachment if necessary)	<u></u>	_
	ALC	778.7
LE V: Other provisions, if any.	ORE B	CUCC MAI
	SS	<u>-</u>
 		Ā
	987	:
REQUIRED SIGNATURE:		. (
	aurick -	
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 aw	are
any false information submitted in a document as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree	c l

Emilia Silva - (alandijello 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)