# LZZCZ0310154

(Re	equestor's Name)
	idress)
(Ad	dress)
(Cit	ry/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bu	siness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
/	,
WILCOU	) 88368

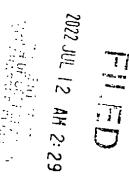
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 1, 2022

**EXPRESS** 

SUBJECT: OXALIS PROPERTIES LLC

Ref. Number: W22000088368

We have received your document for OXALIS PROPERTIES LLC and your check(s) totaling \$180.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Matthew T Moon
Regulatory Specialist II Supervisor

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2022 JUL 12 MM 2:29

www.sunbiz.org

Letter Number: 022A00014959



#### 12905 SW 42 STREET Suite: 210 MIAMI, FL 33175 Phone: 305-444-4994

Email: filing@ecfsfiling.com

Office Use Only

Other:

#### CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. OXALI		s Irc.	P16000050089
(CORPORATE	NAME)	(DC	DCUMENT #)
2(CORPORATE	NAME)		DCUMENT #)
3.	·······	(50	, content ",
(CORPORATE	NAME)	(DC	OCUMENT #)
☐ Walk-In	X Pick up time:	Certified Copy	☐ Certificate Of Status
New Filings	Amer	ndments	Other Filings
Profit	Amendr	nents	Annual Report
Non-Profit	Resigna	ation	Fictitious Name
Limited Liability	Dissolut	ion/Withdrawal	Apostille:
Other:	Other:		

Examiners Initials

#### **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:  Oxalis Properties Inc.
(Enter Name of Other Business Entity) Corporation
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Oxalis Properties 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.
P16 0500 500 69

Signed this 512 day of May	20_22_
Signature of Authorized Representative of Limite	dAinbility Company:
, *	X =
Signature of Authorized Representative:	
Printed Name: DIANE Nobile	Title: downthe
	<del></del>
Signature(s) on behalf of Other Business Entity:  S	ce below for required signature(s)[
1	
Signature	
Printed Name: DIANT NODIU	Title: 7.6.22
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Signature:	
Signature:Printed Name:	Title: 2 2 2 2 2 2 2
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or C	Officer.
If Directors or Officers have not been selected, an Inc.	orporator must sign.
· · · · · · · · · · · · · · · · · · ·	
If Florida General Partnership or Limited Liability	y Partnership:
Signature of one General Partner.	(1) A second of the second of
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:
Signatures of ALL General Partners.	in the second second
4 . <del></del>	
All others:	*
Signature of an authorized person.	A description of the second
	1
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Cerunea Convi	\$30.00 (Optional)
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ıy is:	
Oxalis Properties LLC		
	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	the principal office of the Limited Liability Co	ompany is:
Principal Office Address:	Mailing Address:	•
Trincipal Office Address.	Maning Augress.	
C/O Diane Nobile		
701 Brickell Ave., 17th Floor		
Miami, FL 33131		
	tered Office, & Registered Agent's Signatu Registered Agent. You must designate an individual or anot the registered agent are:	
	and registered again and.	
	/ING ARNSTEIN & LEHR LLP	
}	Name	
701 Brickell Ave., 17th Flo	oor	
	(P.O. Box NOT acceptable)	
Miami	33131 FL	
City	Zip	
liability company at the place designate registered agent and agree to act in this constant statutes relating to the proper and compact accept the obligations of my position and Registered Agent's	and to accept service of process for the above sted in this certificate. I hereby accept the appoint apacity. I further agree to comply with the problete performance of my duties, and I am familiates registered agent as provided for in Chapter  Signature (REQUIRED)	intment as ovisions of all iar with and

#### 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	Name and Address:	
MGR	701 Brickell Ave., 17th Floor	
	Miami, FL 33131	
	2022	}
(Use attachment if necessary)	ZZ JUL 12	ਰਦ (*** (***
TCLE V: Other provisions, if any.	AM 2: 28	1 1
REQUIRED SIGNATURE:		<del></del>

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.

Typed or printed name of signee

Filing Fees

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