# L22000410378

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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### **COVER LETTER**

TO:	New Filing S Division of C		,		·	J
SHR	IFCT: TOKIO S	SOLUTIONS LLC				
50130		(Name of Res	sulting Florida Limi	ted Cor	mpany)	
			~		nd fees are submitted to conver accordance with s. 605.1045, F	
Please	e return all corr	espondence concernin	g this matter to:			
LIDA I	MONTOYA					
		(Contact Person)		_		
		(Firm/Company)		-		
80501	N UNIVERSITY			-		
		(Address)				
TAMA	RAC, FL 33071			-		
LAND	·	City, State and Zip Code)  105@GMAIL.COM				
		e used for future annual re	port notifications)	-		
		on concerning this ma				
LIDA N	MONTOYA		at (	,306-	5707	
	(Name of Conta	ict Person)		(Day	ytime Telephone Number)	
		or the following amou a bank located in the		roces:	sed by this office must be paya	ible in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles unization)	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, 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.

outaves.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: TOKIO SOLUTIONS 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)
01/14/2020 on
on date of organization or incorporation).
TOKIO SOLUTIONS 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.)
<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.
7. <b>28</b>

\$5.00 (Optional)

Certificate of Status:

نن

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:	
The name of the Elimica Diability Company	13.	
TOKIO SOLUTIONS LLC		
(Must contain the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
9818 ARBOR OAKS LN	9818 ARBOR OAKS LN	
302	302	
BOCA RATON, FL 33428	BOCA RATON, FL 33428	
The name and the Florida street address of the LIDA MONTOYA Na		
	_	
9818 ARBOR OAKS LN 302 Florida street address (P.	O. Box NOT acceptable)	
BOCA RATON	FL 33428	
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as the Registered Agent's Signature.	I in this certificate, I hereby acacity. I further agree to complete performance of my duties, a registered agent as provided functions of the provided for the performance of the perfo	ccept the appointment as ply with the provisions of all and I am familiar with and

### 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	LIDA MONTOYA				
	9818 ARBOR OAKS LN 302				
	BOCA RATON, FL 33428				
MGR	MARIA S RODRIGUEZ HUERTAS				
	9818 ARBOR OAKS LN 302				
	BOCA RATON, FL 33428				
(Use attachment if necessary)	SELTELIÁI FALLAHAS				
	EP.				
TICLE V: Other provisions, if any.	-7 PR				
	52 6 				

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.

LIDA MONTOYA

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)