# 122000414822

(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:
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W2200083977

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June 21, 2022

MARIBEL CASTILLO 2050 N ANDREWS AVE ST 102 POMPANO BEACH, FL 33069

SUBJECT: OMG LIQUIDATION SALES, LLC

Ref. Number: W22000083977

We have received your document for OMG LIQUIDATION SALES, 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):

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 a limited partnership or limited liability limited 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.

Karen Lovelace Regulatory Specialist II

Letter Number: 922A00013941

### COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: OMG LIQUIDATION S	SALES, ŁLC		
SUDJECT	Name of Resulting Florida Li	nited Company)	<del></del>
The enclosed Articles of Convers Business Entity" into a "Florida l	sion, Articles of Organiz Limited Liability Compa	ation, and fees are submitted ny in accordance with s. 60	to convert an "Othe 5.1045, F.S.
Please return all correspondence	concerning this matter to	e:	
Maribel Castillo			
(Contact Pe	rson)	<del></del>	
OMG LIQUIDATION SALES, LLC			
(Firm/Comp	pany)	_	
2050 North Andrews Avenue Suite 1	102		
(Addres	S)	<del>-</del>	
Pompano Beach, FL 33069			
(City, State and	Zip Code)	<del></del>	
omgliquidation@gmail.com			
E-mail Address: (to be used for futu	re annual report notifications	)	
For further information concerning	ng this matter, please ca	l:	
Maribel Castillo	at ( <u>470</u>	,900-6890	
(Name of Contact Person)	(Area Co	de) (Daytime Telephone Numbe	r)
Enclosed is a check for the follow dollars and drawn on a bank locat	ving amount: (All check ted in the United States)	s processed by this office mu	ist be payable in US
■ \$150,00 Filing Fees (\$25 for Conversion and Certifica & \$125 for Articles Status of Organization)			s.
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassec. FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. S Tallahassee, FL 32303	

## 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:  OMG LIQUIDATION SALES, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
9/10/2019
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: OMG LIQUIDATION SALES, 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.

DocuSign Envelope ID: 237FFA16-34C5-40FA-8AAA-0C0835E20B0B Signed this \_\_\_\_\_\_ day of \_\_\_\_\_\_ 20\_\_\_\_\_\_. Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: \_\_ Printed Name: Maribel Castillo Signature(s) on behalf-of Other Business Entity: [See below for required signature(s)] Signature: \_ Printed Name: Maribel Castillo \_\_\_\_\_\_Title: \_\_\_\_\_ Signature: \_\_\_\_\_\_ Title: \_\_\_\_\_\_ Signature: \_\_\_\_\_\_ Printed Name:\_\_\_\_\_\_\_Title:\_\_\_\_\_\_ Printed Name:\_\_\_\_\_\_\_Title:\_\_\_\_\_\_ Signature: \_\_\_\_\_\_ Title: \_\_\_\_\_\_ If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees. \$25.00 Articles of Conversion: Fees for Florida Articles of Organization: \$125.00

Certified Copy:

Certificate of Status:

\$30.00 (Optional)

\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Li	ability Company	is:	
OMG LIQUIDATION SALES,	LLC		
(Must contain t	ne words "Limited Liab	oility Company, "L.L.C.," or "LLC.")	
ADTICLE II - Addmini			
ARTICLE II - Address: The mailing address and str	eet address of the	principal office of the Limite	ed Liability Company is:
the maning address and su	cot agai con wi viic	F	, ,
Principal Office Address:		Mailing Address:	
2050 North Andrews Avenue		2050 North Andrews Aven	ı.ie
Suite 102	<del></del>	Suite 102 PMB1081	
Pompano Beach, FL 33069		Pompano Beach, FL 3306	9
			<del>-</del>
The Limited Liability Company can business entity with an active Florida s  The name and the Florida s  Maribel	da registration.) treet address of th	rgistered Agent. You must designate an	individual of another
Manber		nme	
	110	Mic	
2050 No	orth Andrews Avenu	ue Suite 102	
Florida	a street address (P	P.O. Box <u>NOT</u> acceptable)	
Pompan	o Beach	FL 33069	
	City	Zip	
liability company at the registered agent and agrees statutes relating to the paccept the obligations	te place designated pe to act in this cap proper and comple of my position as	d to accept service of process of in this certificate, I hereby accept. I further agree to compete performance of my duties, a registered agent as provided in the service of the service	ccept the appointment as ply with the provisions of al and I am familiar with and
	(CONT	TINUED)	ن

Maribel Castillo  2050 North Andrews Avenue  Pompano Beach, FL 33069  (Use attachment if necessary)  LE V: Other provisions, if any.  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, I am awa any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.\$17.155, F.S.  Maribel Castillo  Typed or printed name of signee  Filing Fees  \$125.00 Filing Fee for Articles of Organization and Designation of Registere	<u>Fitle:</u>	Name and Address:
Maribel Castillo  2050 North Andrews Avenue Pompano Beach, FL 33069  (Use attachment if necessary)  I.E. V: Other provisions, if any.  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, I am awa any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155, F.S.  Maribel Castillo  Typed or printed name of signee  Filing Fees  \$125.00 Filing Fee for Articles of Organization and Designation of Registere	'AMBR" = Authorized Member	
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