L22000436652

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: ALM PRO CONSTRUCTION AN	ND REMODELI	NG LLC	
(Name of Re	sulting Florida L	imited Con	npany)
The enclosed Articles of Conversion, Articles of Plorida Limited L.	***		
Please return all correspondence concerning	g this matter	to:	
ANDREI BOBEICA			
(Contact Person)	·····		
ALM PRO CONSTRUCTION AND REMODEL	ING LLC		
(Firm/Company)			
7840 OREGOLD DR			
(Address)			
NEW PORT RICHEY FL 34654			
(City, State and Zip Code)			
almpronola@gmail.com			
E-mail Address: (to be used for future annual re	port notification	ns)	
For further information concerning this ma	itter, please ca	ill:	
ANDREI BOBEICA	at (847	, 85 O	00 85
(Name of Contact Person)	(Area C	ode) (Day	vtime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the	•	•	sed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) CS155.00 Filing Fees and Certificate of Status	☑\$180.00 F and Certified	*	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Address:		Stree	t Address:
New Filing Section			Filing Section
Division of Corporations			ion of Corporations
P.O. Box 6327			Centre of Tallahassee
Tallabassee FL 32314		2415	N. Monroe Street, Suite \$10

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: ALM PRO CONSTRUCTION AND REMODELING LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY (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)
11/30/2016
on Idate of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ALM PRO CONSTRUCTION AND REMODELING 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.

HILED 2022 OCT -3 PM 2: 26

Sig	gned this <u>13</u>	day of JULY	2022
		ized Representative of Lim	
Sig Pri	mature of Authoriz nted Name: <u>ANDRE</u>	ed Representative: <u>A.Bo</u> BOBEICA	beica A.D. Title: MANAGER
Sig	nature(s) on behal	f of Other Business Entity:	[See below for required signature(s)]
> Sig	nature:	eica	
Prir	nted Name: ANDRE	BOBEICA	Title: MANAGER
)) _{Sia}	1. 3 to 1. 3 to 1.	i ina	
- org Prir	nted Name: LUIZA B	OBEICA	Title: MANAGER
Sig Prir	nature: nted Name:	 .	Title:
Sig	nature:		Title:
1111	nted Name;	F11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Litte:
Sig	nature:		
Prir	nted Name:		Title:
Sig	nature:		
Prin	nted Name:		Title:
	Torida Corporatio nature of Chairman	<u>n:</u> . Vice Chairman, Director, or	Officer.
_		have not been selected, an Ir	
I f L	51	nemandia na Timiena Tinita	See Donas and Educ
	nature of one Gener	<u>rtnership or Limited Liabil</u> al Partner.	ny partnersmp:
			•
	<u>Horida Limited Pa</u> natures of <u>ALL</u> Ger	rtnership or Limited Liabil	ity Limited Partnership:
Sig	natures of ATT. Get	ictal Parmers,	
<u>All</u> Sig	others: nature of an authori	zed person.	
Fee	<u>:s:</u>		
	Articles of Cor	nversion:	\$25.00
	Fees for Florid	a Articles of Organization:	\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I	- Name:
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The name of the Limited Liability Company is:

ALM PRO CONSTRUCTION AND REMODELING LLC

(Must contain the words "Limited Liability Company, "Lil. C.," or "Ll. C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>Mailing Address:</u>	
7840 OREGOLD DR	7840 OREGOLD DR	
NEW PORT RICHEY FL 34654	NEW PORT RICHEY FL 34654	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

ANDREI BOBEICA	
Nai	ne
7840 OREGOLD DR	
Florida street address (P.	O. Box NOT acceptable)
NEW PORT RICHEY	FL. 34654
City	Zip

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. Thereby 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.,

A. Bobeica
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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		
MGR	ANDREI BOBEICA	
	7840 OREGOLD DR	
	NEW PORT RICHEY IL 34654	
MGR	LUIZA BOBEICA	
	7840 OREGOLD DR	
	NEW PORT RICHEY IL 34654	
	4	
		
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(Use attachment if necessary)	•	2022 OCT -3
•		
		F-1
TCLE V: Other provisions, if any.		
		H 2
		22 2
		<u> </u>

REQUIRED SIGNATURE:

£B.

A. Bobeica

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.

ANDREI BOBEICA

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)