# 22000 451619

(Re	equestor's Name)	
(Address)		
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Во	usiness Entity Name	e)
(Document Number)		
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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TALL THANKER FLORIDA

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### **COVER LETTER**

Division of Corporations		
SUBJECT: HISPANUSA LLC		
	ulting Florida Limite	ed Company)
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lie	•	on, and fees are submitted to convert an "Other" in accordance with s. 605,1045, F.S.
Please return all correspondence concerning	g this matter to:	
(Contact Person)		
(Firm/Company)		
8050 N UNIVERSITY DR STE 206	<u></u>	
(Address)		
TAMARAC, FL 33321		
(City, State and Zip Code) INFO@HISPANUSA.COM		
E-mail Address: (to be used for future annual rep	port notifications)	
For further information concerning this mat	•	
RUTH CHAVERRA	_at (	934-0194
(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
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	S180.00 Filing I and Certified Copy	
STREET ADDRESS:	MAILI	NG ADDRESS:
Registration Section		ation Section
•		of Corporations ox 6327
Clifton Building 2661 Executive Center Circle		ssee, FL 32314

Tallahassee, FL 32301

### **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:

HISPANUSA INC	
(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.)	
First organized, formed or incorporated under the laws of FLORIDA	
04/14/2003 (Enter state, or if a non-U.S. entity, the n	name of the country)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	les of Organization:
HISPANUSA LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:	
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the date listed in the attached Articles of Organization, if an effective date is listed there	same as the effective
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date 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 appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	I rights the amount to
	<b>~</b> 2

Signed this 11TH day of OCTOBER	20_22
Signature of Authorized Representative of Line	ited Liability Company:
Signature of Authorized Representative: Printed Name: RUTH CHAVERRA	Title: XIGR
Signature(s) on behalf of Other Business Entity:	  See below for required signature(s)
Signature:	Title: _P
Signature: Printed Name: HECTON MONTALVO	
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	tv Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

s:	
	<del></del>
oility Company, "L.L.C.," or "LLC	1.")
principal office of the Lin	nited Liability Company is:
Mailing Address:	
8050 N UNIVERSITY D	R STE 206
TAMARAC, FL 33321	
gistered Agent. You must designate to registered agent are:	
ne	-
E 206	
O. Box NOT acceptable)	-
FL 33321	_
Zip	
in this certificate. I hereby acity. I further agree to co	ss for the above stated limited accept the appointment as imply with the provisions of all and I am familiar with and d for in Chapter 605, F.S
t	principal office of the Lin  Mailing Address:  8050 N UNIVERSITY D  TAMARAC, FL 33321  ed Office, & Registered 2 istered Agent. You must designate e registered agent are:  E 206  O. Box NOT acceptable)  FL 33321  Zip  to accept service of proces in this certificate, I hereby acity. I further agree to con experiormance of my duties egistered agent as provide  gnature (REQUIRED)

### ARTICLE IV-

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	RUTH CHAVERRA
	8050 N UNIVERSITY DR STE 206
	TAMARAC, FL 33321
MGR	MARYORI CHAVERRA
	8050 N UNIVERSITY DR STE 206
	TAMARAC, FL 33321
	<del></del>
f an effective date is listed, the date must or 90 days after the date of filing.)  ote: If the date inserted in this block does not meet	e date of filing:
ocument's effective date on the Department of State	s records.
RTICLE VI: Other provisions, if any.	
<u> </u>	
·	
DECEMBED SIGNATURE.	
REQUIRED SIGNATURE:	

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)

Page 2 of 2

**RUTH CHAVERRA**