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Special Instructions to	Filing Officer:
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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FL

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## **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:  Adam's 1 Ocho Perpodeling Corporation.  (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Adam'S & Ochoa Remodeling CORP.  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on 02/18-2019 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Adam's 2000 Perceteling UC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 12 15 2022.  (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.
2022 DEC SECRET TALLLY

Signed this 15 day of December	_20_22				
Signature of Authorized Representative of Limited Liability Company:					
Signature of Authorized Representative: 77 Printed Name: AV 140 Och 09	_ litte: _ <del>TYESICIETI</del>				
Signature(s) on behalf of Other Business Entity:					
Signature: 105 e L ADLWS	Title: V. President				
Signature:Printed Name:	_ Title:				
Signature:Printed Name:	_ Title:				
Signature: Printed Name:	Title:				
Signature:Printed Name:	Title:				
Signature:Printed Name:	Tielas				
Printed Name:	_ Title				
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.					
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:				
If Florida Limited Partnership or Limited Liabilit 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)				

022 DEC 19 PM 2: 00 SECRETARY DE STATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Adam's Lochoa Ra (Must contain the words "Limited Liability	modeling LLC Company, "L.L.C.," or "LI.C.")		
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Lia	bility Compa	ny is:
Principal Office Address:	Mailing Address:		
97935. Orange Blosson Trail, Suite S Orlando, F1 32837	97935. Orange F Trail, Suite 5 Orlando, Fl 32	81058m 837	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's red Agent. You must designate an individ	Signature: ual or another	
The name and the Florida street address of the re	gistered agent are:		
Name	g (President)		
97935.0range Florida street address (P.O.	Blossom Trail, Sul Box <u>NOT</u> acceptable)	te 5	
	FL 32837-		
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete page accept the obligations of my position as regions.	this certificate, I hereby accept t ty. I further agree to comply wit. erformance of my duties, and I a	he appointme h the provisio m familiar wi	nt as ns of all th and
Registered Agent's Signa	other (REQUIRED)	2022 DEC 19 SECRETAS TALLAHA	
(CONTINU	J <b>ED)</b>	9 PM 2: 00 RY OF STATE HASSEE, FL	

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The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member	r
"MGR" = Manager	Toca Line Adams
	Jose Luis Adams
	9793 5. Orange Blossom trail, suite. Orlando, Fl 32837
	<u>Orlando</u> 17 5283.7
$\mathcal{O}$	Arturo Ochoa
4	2793 S. Oroma BUDSION Trail Suit
	0793 S. Orange Brossom Trail, suit Drando, Fl 32837
	Programme and the state of the
(Use attachment if necessary)	
DECLIDED SIGNATURE.	
REQUIRED SIGNATURE:	
ALLO	no ochoA
Signature of a mamb	er or an authorized representative of a member
This document is executed in acco	ordance with section 605.0203 (1) (b), Florida Statutes. I am aware that
any false information submitted in a as provided for in s.817.155, F.S.	a document to the Department of State constitutes a third degree felony
Avto	
11710	Typed or printed name of signee
	Filing Fees
\$125 Of Filing Fee for Arth	Icles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (O	ibbonai) — N. S.III CETHICAIE OF STATUS (UDITUDAL)
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