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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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COVER LETTER

TO:	New Filing S Division of C				
SHR	IFCT: MARINO	S CONCIERGE COMPA	ANY		
300	Jr.C1.	(Name of Res	ulting Florida Limit	ed Con	ipany)
The c Busin	nclosed Article less Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organizati ability Company	on, an ''' in ac	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concerning	g this matter to:		
MARI	NO ESCOBAR				
		(Contact Person)		-	
MARI	NOS CONCIERO	SE COMPANY			
		(Firm/Company)	-	3	
1013	NE 6 STREET				
		(Address)		-	
HALL	ANDALE FLORII	DA 33009			
	((City, State and Zip Code)		-	
JACF	2002@GMAIL.C	ОМ			
E-	mail Address: (to b	e used for future annual re	port notifications)	-	
For fi	urther informati	on concerning this ma	tter, please call:		
MARI	NO ESCOBAR		_at (<u>305</u>	,5138	722
	(Name of Conta	ict Person)	(Area Code	(Day	rtime Telephone Number)
		for the following amount a bank located in the		process	sed by this office must be payable in US
(\$25 f	50.00 Filing Fees or Conversion 5 for Articles panization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add				t Address:
New Filing Section					Filing Section
	Division of C P.O. Box 632				ion of Corporations Centre of Tallahassee
	Tallahassee.				N. Monroe Street, Suite 810

Tallahassee, FL 32303

-

Articles of Conversion

For

"Other Business Entity"

2022 DEC 20 PM 4: 12

Into

Florida Limited Liability Company LAHASSEE, FLORIDA

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: MARINOS CONCIERGE COMPANY
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
05/29/2019
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MARINOS CONCIERGE COMPANY 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.

Signed this 12 day of 5	JECEMBER	
Signature of Authorized Rep	recentative of Limi	And Lightlity Company
· · · · · · · · · · · · · · · · · · ·		Liability Company.
Signature of Authorized Repre-	sentative:	/
Printed Name: MARINO ESCOBAR	₹	Title: PRESIDENT MANAGER
Signature(s) on behalf of Othe	r Business Entity:	[See below for required signature(s)]
-tzul)		
Signature: Zhaw		DECIDENT HAMAGED
Printed Name: MARINO	ESCOBAR	Title: PRESIDENT MANAGER
Signature:		
Printed Name:	•	Title:
Signature:		
Printed Name:		_ Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name		Title:
Timed (Mile)		
Signature:		
Printed Name:		Title:
If Florida Corporation:	, 15.	O.F.
Signature of Chairman, Vice Ch		
If Directors or Officers have not	been selected, an in	corporator must sign.
If Florida General Partnership	or Limited Liabili	ty Partnership:
Signature of one General Partne		<u></u>
If Florida Limited Partnership		ty Limited Partnership:
Signatures of <u>ALL</u> General Part	ners.	
All others: Signature of an authorized perso	\n	
Signature of an authorized perse	711.	
<u>Fees:</u>		
Articles of Conversion:		\$25.00
Fees for Florida Article		\$125.00
Certified Copy:	Č	\$30.00 (Optional)
Certificate of Status:		\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MARINOS CONCIERGE COMPANY LLC				
	Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
	the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
1013NE 6 STREET	1013NE 6 STREET			
HALLANDALE FLORIDA 33009	HALLANDALE FLORIDA 33009			
	Cthe manistered agent area			
The name and the Florida street address of MARINO ESCOBAR				
MARINO ESCOBAR	the registered agent are: Name			
MARINO ESCOBAR 1013NE 6 STREET	Name			
MARINO ESCOBAR 1013NE 6 STREET	Name (P.O. Box NOT acceptable)			
MARINO ESCOBAR 1013NE 6 STREET	Name (P.O. Box NOT acceptable)			
MARINO ESCOBAR 1013NE 6 STREET Florida street address	Name			

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:				
"MGR" = Manager MANAGER	MARINO ESCOBAR 1013NE 6 STREET HALLANDALE FLORIDA 33009				
	MR DEC 20 T				
(Use attachment if necessary)	<u> </u>				
RTICLE V: Other provisions, if any.					
REQUIRED SIGNATURE:					
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that				
any false information submitted in a docume as provided for in s.817.155, F.S. MARINO ESCOBAR	nemt to the Department of State constitutes a third degree felony				
	ped 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)