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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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SECRETARY OF STATE ALL AMASSEE. FLORID

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DIRECTOR'S OFFIRE DIVISION - LERPORATION - LERPORATION - LERPORATION - LEANASSEE, FLORIDA

RECEIVED

COVER LETTER

TO:	New Filing Section Division of Corpo						
erm	JECT: CASTRO PLU		ASTRO_	Γ	Ph	LUMBING LLC	
SUD	ECT:	(Name of Res	ulting Florida	1.imited	l Comp	oany)	_
Busin	enclosed Articles of (ness Entity" into a "l e return all correspo	Florida Limited Li	ability Com	pany''	n, and in ace	fees are submitted to cordance with s. 605.1	convert an "Other 045, F.S.
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	•	Contact Person)		— —·			
SAN	TOS ACCOUNTING S			.			
	,	firm/Company)					
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SUM	MERFIELD, FL 34491						B -2
T' A V I	.City. RETURNWS@GMAIL	State and Zip Code)					F-15
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	further information c						4 6: 55 STATE FUNDAR
	ESKA PAGAN SANTO		352	`	553 5	129	,
	(Name of Contact Pe		ai (Code)	(Day	time Telephone Number)	_
Encl doll:	osed is a check for turns and drawn on a b	he following amov ank located in the	int: (All che United Stat	ecks pi es)	rocess	ed by this office must	be payable in US
(\$25 & \$1	for Conversion an	\$155.00 Filing Fees d Certificate of atus	S180.00 and Certific			☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Address New Filing Secti Division of Corp P.O. Box 6327 Tallahassec, FL	on orations			New I Divisi The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Sui	tc \$10

Tallahassee, FL 32303

Tallahassee, FL 32314

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, Flor Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: CASTRO PLUMBING LLC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, c
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, c
First organized, formed or incorporated under the laws of
(Einer state, of it a non-old, the name of the country)
MAY 25, 2021 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Tree attached Articles of Tr
CASTRO PLUMBING LLC STRO O PLUMBING 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.

\$5.00 (Optional)

Signed this 01 day of JANUARY 20 23

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:							
GASTRO PLUMBING-LLE CAST	RO O PLUMBING LLC imited Liability Company, "L.L.C.," or "LLC.")						
ARTICLE II - Address:	ss of the principal office of the Limited Liability Company is						
Principal Office Address:	Mailing Address:						

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:

ARTICLE 1 - Name:

2676 SE 152ND LANE

OCALA,FL 34473

SANTOS ACCOUNTING S	ERVICES LLC	IAI 2
Na	me	3 FE
3960 SE 136TH PLACE		B-2
Florida street address (P	O. Box NOT acceptable)	
SUMMERFIELD	FL 34491	י די די
City	Zip	: 55 [NIE [NIE]
		04.2

2676 SE 152ND LANE

OCALA, FL 34473

Having been named as registered agent and to accept service of process for the above stated limite liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of a 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..

egistered Agent Signature (REQUIRED)

(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		
		_ _
		
P	FREDY CASTRO BARAHONA 2676 SE 152ND LANE	
	OCALA, FL 34473	
		-
(Use attachment if necessary)	ŢĂĹĹ	Sf. 23
(000	AHA	23 FEB
ICLE V: Other provisions, if any.	SC S	λ ^λ 2
		<u> </u>
		<u> </u>
REQUIRED SIGNATURE:		··
Fael Cafe		

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.

FREDY CASTRO BARAHONA

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)

STATE OF MARYLAND Department of Assessments and Taxation

I. MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT CASTRO PLUMBING LLC (W21823398), REGISTERED MAY 25, 2021, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS DECEMBER 22, 2022.

MITTING

Michael L. Higgs Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

Online Certificate Authentication Code: KuJCEF4DbEWWJOerpjmO3w To verify the Authentication Code, visit http://dat.maryland.gov/verify