

L23000060331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

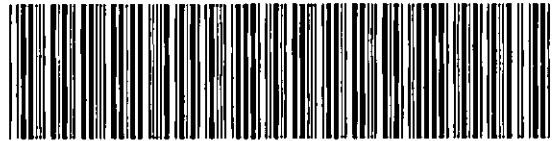
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 FEB -8 PM 2:31

SECRETARY OF STATE  
TALLAHASSEE, FL 32305

02/07/23--01005--005 \$360.00

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2023 FEB -6 PM 4:06

TALLAHASSEE, FL 32305



12905 SW 42 STREET Suite: 210  
MIAMI, FL 33175  
Phone: 305-444-4994  
Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. 1845 SPlex Corp P22000034043  
(CORPORATE NAME) (DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME) (DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME) (DOCUMENT #)

☐ Walk-In

X Pick up time: \_\_\_\_\_



☒ Certified Copy

☐ Certificate Of Status

| New Filings                         |                          |
|-------------------------------------|--------------------------|
| <input type="checkbox"/>            | Profit                   |
| <input type="checkbox"/>            | Non-Profit               |
| <input type="checkbox"/>            | Limited Liability        |
| <input checked="" type="checkbox"/> | Other: <u>Conversion</u> |

| Amendments               |                        |
|--------------------------|------------------------|
| <input type="checkbox"/> | Amendments             |
| <input type="checkbox"/> | Resignation            |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Other:                 |

| Other Filings            |                 |
|--------------------------|-----------------|
| <input type="checkbox"/> | Annual Report   |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Apostille:      |
| <input type="checkbox"/> | Other:          |

|                    |  |
|--------------------|--|
| Examiners Initials |  |
|--------------------|--|



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 7, 2023

EXPRESS CORPORATING SERVICE

SUBJECT: 1845 5PLEX LLC  
Ref. Number: W23000016347

We have received your document for 1845 5PLEX LLC. However, the document has not been filed and is being returned for the following:

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham  
Regulatory Specialist III  
Director's Office

Letter Number: 423A00002879

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2023 FEB - 8 PM 3:32

TALLAHASSEE, FLORIDA

FILED  
2023 FEB -8 PM 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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:  
1845 5PLEX CORP

(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  
(Enter state, or if a non-U.S. entity, the name of the country)

on 04/20/2022  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
1845 5PLEX 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 31<sup>ST</sup> day of JANUARY 20<sup>23</sup>.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: Roxana Valverde  
Printed Name: ROXANA E VALVERDE Title: PST

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: Luis Maquira  
Printed Name: LUIS MAQUIRA Title: VP

Signature: Ivonne Lapeyre  
Printed Name: IVONNE LAPEYRE Title: MGR

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.  
If Directors or Officers have not been selected, an Incorporator must sign.

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**All others:**

Signature of an authorized person.

**Fees:**

|                                            |                    |
|--------------------------------------------|--------------------|
| Articles of Conversion:                    | \$25.00            |
| Fees for Florida Articles of Organization: | \$125.00           |
| Certified Copy:                            | \$30.00 (Optional) |
| Certificate of Status:                     | \$5.00 (Optional)  |

**FILED**  
2023 FEB -8 PM 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FL