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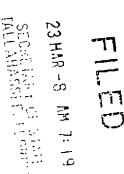
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Special Instructions to	riling Officer.	

Office Use Only



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## **COVER LETTER**

Division of Co							
SUBJECT: Carbonell	Auto Glass Inc						
50 <b>5</b> 5201	(Name of Res	ulting Florida Lim	ited Cor	mpany)	_		
				nd fees are submitted to accordance with s. 605.1		n "Oth	er
Please return all corre	spondence concerning	g this matter to:					
Lucia Estrella							
	(Contact Person)		_				
Licenses & Permits LLC	;						
•	(Firm/Company)		_				
8300 W Flagler St. Suite	e 114				_		
	(Address)		_		SE FAL	23	
Miami, Fl 33144					- <u>1</u> 9	23 HAR	7
(C	ity, State and Zip Code)		_		52	ı	
licenses114@gmail.con	า				: 12.1. : 12.1.	<del>ر</del> ت دی	
E-mail Address: (to be	used for future annual rep	port notifications)	_			3	Ę
For further informatio	n concerning this mat	ter, please call:			Glab Jivit	7: 19	
Lucia Estrella		_at (	226-	8727	.4		
(Name of Contac	t Person)	(Area Code	) (Day	ytime Telephone Number)	_		
dollars and drawn on a	a bank located in the t		oroces.	sed by this office must t	oe payablo	in US	<b>;</b>
	□\$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 Addre New Filing Sec Division of Co P.O. Box 6327	ction rporations		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee			

2415 N. Monroe Street, Suite 810 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, Florida Statutes.

(Enter Name of Other Business Entity)	-·
2. The "Other Business Entity" is a	on law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the Februarty 23, 2021  (date of organization, formation or incorporation)	: name of the country)
3. The name of the Florida Limited Liability Company as set forth in the <b>attached Art</b> i	SELL 23 TO TO THE SELL SELL SELL SELL SELL SELL SELL SE
Carbonell Auto Glass 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 9 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	00 calendar days after

- 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.

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTIGUE	·	
ARTICLE I - Name: The name of the Limited Liability Comp.	any je	
the name of the Elimed Elability Comp.	any is.	
0 1 11 11 11 11 11		
Carbonell Auto Glass LLC		<del></del>
(Must contain the words "Limited	I Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited	l Liability Company is:
Principal Office Address:	Madina Add.	
Timetpar Office Address:	Mailing Address:	
1900 West 54th Street Apt 116	1900 West 54th Street Apt 1	116
Hialeah, Fl 33012	Hialeah, Fl 33012	
		<del>-</del>
ADTICLE III Dogictored Agent Deci	Estumo d'Officio (C. D. 1.4	49 431
ARTICLE III - Registered Agent, Regi The Limited Liability Company cannot serve as its ow	⊓Registered Agent. You must designate an ir	nt's Signature: idividual or another
business entity with an active Florida registration.)	2 2 2	
The name and the Florida street address o	of the registered agent are:	
Eduardo C Rosales Ca	<del></del>	
	Name	<b>~</b> 1
1900 West 54th Street	Apt 116	Z3 HAR SECREI
Florida street addres	s (P.O. Box NOT acceptable)	
Hialeah	r. 33012	Signal Control of the
<del>-</del>		× × × × × × × × × × × × × × × × × × ×
City	Zip	
Having been named as registered agent	and to accept service of process for	r the above staled limited
<ul> <li>liability company at the place design</li> </ul>	<b>d</b> ted in this certificate. I hereby acce	ept the appointment as
registered agent and agree to act in this	capacity. I further agree to comply	with the provisions of all
— statutes relating to the proper and com	iplete performance of my duties, and	d Lam familiar with and
accept the obligations of my position	as registered agent as provided for	in Chapter 605, F.S.,
Rogistered Agent	's Signature (REQUIRED)	

(CONTINUED)

### 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	Eduardo C Rosales Carbonell
WIGH	
	1900 West 54th Street Apt 116 Hialeah, FI 33012
	Maledii, FI 33012
- <del></del>	<del></del>
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EV: Other provisions, if any.	<u> </u>
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EV: Other provisions, if any.	
E V: Other provisions, if any.  REQUIRED SIGNATURE:	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member of a	n authorized representative of a member
E V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member of at This document is executed in accordance we	n authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lam aware that
E V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member of at This document is executed in accordance we	n authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member of at This document is executed in accordance wany false information submitted in a document.	n authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lam aware that
Signature of a member of a This document is executed in accordance wany false information submitted in a document as provided for in s.817.155. F.S.	n authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware that entry the Department of State constitutes a third degree felony
Signature of a member of a This document is executed in accordance wany false information submitted in a document as provided for in s.817.155. F.S.	n authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lam aware that