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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(D
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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TALLA ESSECTEDITO

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Yaidith Gareiga. PA	
(Name of Res	ulting Florida Limited Company)
	les of Organization, and fees are submitted to convert an "Other ability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:
Frank J. Aloia, Jr., Esq.	
(Contact Person)	
Aloia, Roland, Lubell & Morgan, PLLC	
(Firm/Company)	
2222 Second Street	
(Address)	
Fort Myers, FL 33901	
(City, State and Zip Code)	
faloia@lawdefined.com	
E-mail Address: (to be used for future annual re	port notifications)
For further information concerning this mat	ter, please call:
Frank J. Aloia, Jr., Esq.	at (239) 791-7950
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the	nt: (All checks processed by this office must be payable in US United States)
S \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327	Street Address: New Filing Section Division of Corporations The 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.

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.

Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative:	Signed this 14th day of April	20 <u>23</u>
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Maid Castiga	Signature of Authorized Representative of Lim	ited Liability Company:
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Maid Castiga	Signature of Authorized Representative: Vailith Sarris	rna President
Signature: National Signature: National Signature: Printed Name: Yaidith Garciga Title: Manager Signature: Printed Name: Title: 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:		
Printed Name: Yaidith Garciga Title: Manager Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Title: 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: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: 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: Vaidith Consider	Title: Manager
Signature: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Hf 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:	Frinted Name: Yaldun Garciga	Title: <u>Manager</u>
Signature: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Hf 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:	
Signature: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Hf 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:	Printed Name:	Title:
Signature: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Hf 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:	
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Signature: Printed Name: 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:	
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:	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:	
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:	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:	
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:	Printed Name:	Title:
	Signature of Chairman, Vice Chairman, Director, or	
		ity Partnership:
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.	If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.		
<u>Fees:</u>	<u>Fees:</u>	
Articles of Conversion: \$25.00	Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization: \$125.00	S	
Certified Copy: \$30.00 (Optional) Certificate of Status: \$5.00 (Optional)	• •	•

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

GEM Realty Team, LLC	
(Must contain the words "Lin	ited Liability Company, "L.L.C.," or "L.L.C.,")
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
Principal Office Address: 1620 NW 12th Street	Mailing Address: 1620 NW 12th Street

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Yaidith Garciga	
Na	ıme
1620 NW 12th Stre	et
Florida street address (F	P.O. Box <u>NOT</u> acceptable)
Cape Coral	FL 33993
City	Zip

Having been named as registered agent and to accept service of process for the above stated limited 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 all 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..

Yaidith Garciga		
Registered	Agent's Signature (REQUIRED)	

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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	
MGR	Yaidith Garciga
	1620 NW 12th Street
	Cape Coral, FL 33993
	*
ZII I IC	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
· · · ·	
REQUIRED SIGNATURE: 1/a	iditle Carrian
<u>ya</u> ,	idith Garciga
<u>Yaidith Garciga</u> Yaidit	th Garciga (Apr 24, 2023 11:30 EDT)

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.

Yaidith Garciga

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)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees: \$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

	<u> Mailing Address:</u>	<u>Street Address:</u>	
	New Filing Section	New Filing Section	
	Division of Corporations	Division of Corporations	2023
	P.O. Box 6327	The Centre of Tananassee	
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810-	Arn
		Tallahassee, FL 32303	
		Tahanassee, FL 52505	27
Fo	r further information, you may contact the f		∌
		⊒',	_K

Important Notice: As a condition to the conversion, pursuant to s,605.0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)