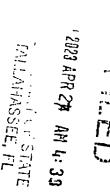
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(Requestor's Name)				
(Address)				
· · ·				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status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

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporati	ions		
SUBJECT: XEL-HA, LLC			
	(Name of Resulting Florida Li	imited Company)	
	-	ration, and fees are submitted to co any" in accordance with s. 605.104	
Please return all corresponde	ence concerning this matter to	0:	
ERNESTO FELIX			
(Conta	act Person)		
XEL-HA,LLC			
(Firm)	(Company)	_	
10275 COLLINS AVE-432			
(A	ddress)		
BAL HARBOUR FL. 33154			
(City, State	e and Zip Code)		
xelhaus@gmail.com			
E-mail Address: (to be used fo	r future annual report notifications	 s)	
For further information conc	erning this matter, please cal	II:	2023 J
ERNESTO FELIX	at (⁸³²	794 0587	APR
(Name of Contact Person		de) (Daytime Telephone Number)	27
Enclosed is a check for the fordollars and drawn on a bank	ollowing amount: (All check located in the United States)	es processed by this office must be	- 무역 45 /~
	5.00 Filing Fees		STE ATE
Mailing Address: New Filing Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8	310

Tallahassee, FL 32303

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.

 The name of the "Other Business Entity" immediately prior to the filing of the A XEL-HA, LLC 	articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a FOREING LIABILITY COMPANY (Enter entity type. Example: corporation, limited partnership, general partnership, co	
· · · · · · · · · · · · · · · · · · ·	ommon law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entit	y, the name of the country)
MARCH 03/2006 on	- 21
(date of organization, formation or incorporation)	2023 AP
3. The name of the Florida Limited Liability Company as set forth in the attached	Articles of Organization:
XEL-HA, LLC	- 16 · 16 · 16 · 16 · 16 · 16 · 16 · 16
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:	CF STAT
(The effective date: Cannot be prior to date of receipt or filed date nor more th	an 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, the document's effective date on the Department of State's records.	is date will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statu	ites.

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.

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Articles of Conversion:

Certificate of Status:

Certified Copy:

Fees for Florida Articles of Organization:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
KEL-HA, LLC		· -
(Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
10275 COLLINS AVE-432	10275 COLLINS AVE-432	
BAL HARBOUR FL 33154	BAL HARBOUR FL 33154	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an	
DIAZ ALEJANDRO		, 20
Name		223
7791 NW 46TH STREET STE	109	APR 27 I
Florida street address (P.O.		HA 27
EL DORAL	FL 33166	2023 APR 27 AM 4: 33 LLY OF STATE ALLAHASSEE, FL
City	Zip	FL STAT
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and complete paccept the obligations of my position as registered Agent's Sign	this certificate, I hereby activ. I further agree to comport of my duties, actistered agent as provided for attre (REQUIRED)	or the above stated limited cept the appointment as ly with the provisions of a nd I am familiar with and

ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member "MGR" = Manager			
MGR = Mallager	ERNESTO FELIX		
MOR	10275 COLLINS AVE-432		
	BAL HARBOUR FL. 33154		
	DAETIARDOONTE. 33134		
			
			
		121	
(Use attachment if necessary)	S. S. S.	2023 APR	
(Ose undermient it necessary)	\	<u>.</u>	1
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	7 0	p acress
RTICLE V: Other provisions, if any.	1 / 1 電影	24) *******
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		-5-	4120
	73	ယ (၂	
REQUIRED SIGNATURE:	Ti Fi		
Signature of a member of a	n authorized representative of a member		
This document is executed in accordance w	ith section 605.0203 (1) (b). Florida Statutes. I am aware the	at	
any false information submitted in a docume as provided for in s.817.155, F.S.	ent to the Department of State constitutes a third degree felo	ny	
ERNEUTO 7	ENX		
Туре	ed or printed name of signee		
	Cilian Cara		

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)