12300024442

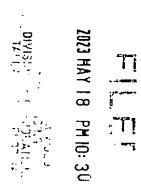
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name	
(Do	ocument Number)	
Certified Copies	_ Certificates of	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000397658540

11/17/22--01028--017 ++150.00



7/1 22 0 00 14 T. SCOTT MAY 1 2023

COVER LETTER

n rations			
	S, LLC		
(Name of Res	sulting Florida Limi	ted Com	pany)
-	_		
ndence concerning	g this matter to:		
ontact Person)		•	
rm/Company)		•	
(Address)			
tate and Zip Code)		•	
for future annual rep	oort notifications)		
ncerning this mat	ter, please call:		
	at (⁷⁸⁶	45226	21
son)	(Area Code)	(Dayti	me Telephone Number)
_	•	rocesse	d by this office must be payable in US
55.00 Filing Fees Certificate of is		y	☐\$185.00 Filing Fees. Certified Copy. and Certificate of Status
			Address:
			ling Section n of Corporations
	(Name of Res (Name of Res Conversion, Artice Florida Limited	(Name of Resulting Florida Limit Conversion, Articles of Organizati Florida Limited Liability Company Indence concerning this matter to: Ontact Person) (Address) (Area Code) (Area Code) (All checks pack located in the United States) (Address) (All checks pack located in the United States) (Address) (Address) (Address) (All checks pack located in the United States) (Address) (Address) (All checks pack located in the United States) (Address) (Address)	(Name of Resulting Florida Limited Components) Conversion, Articles of Organization, and Florida Limited Liability Company" in act and concerning this matter to: Ontact Person) (Address) (Area Code) (Dayting Fees on Certificate of States) (All checks processed and Certified Copy is Street And Certifi

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

TO:

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: DANIEL ZAPATA ENTERPRISES INC
(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
08/11/2017 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
DANIEL ZAPATA ENTERPRISES, 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.
,
20
2023 HAY

Signed this First •1 day of January	_ 20 <u>_ 2</u> ろ
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Daniel Printed Name: DANIEL ZAPATA	Daparal Tiye: MGR
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Daniel Zapada V Printed Name: DANIEL ZAPATA	
Printed Name: DANIEL ZAF/ATA	Title: P
Signature:Printed Name:	Titles
Frinced Name.	
Signature:Printed Name:	Title
Signature:Printed Name:	Title
Signature: Printed Name:	Title
Timed Name.	
Signature:Printed Name:	Title
Timed Name.	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	<u> </u>
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLE L. N			
ARTICLE I - Nam The name of the Lin	e: nited Liability Company	v is:	
DANIEL ZAPATA EN		ability Company, "L.L.C.," or "LL0	
tivius	regular the words. Emilied 1.1	annity Company, Taraca, or this	C. 1
ARTICLE II - Add The mailing address		ne principal office of the Li	imited Liability Company is:
Principal Office Ac	ddress:	Mailing Address:	
700 SW 1st ST APT 8	303	700 SW 1st ST APT 8	303
Miami, FL 33130		Miami, FL 33130	
(The Limited Liability Corbusiness entity with an ac	mpany cannot serve as its own I tive Florida registration.)	ered Office, & Registered Registered Agent. You must design	d Agent's Signature: ate an individual or another
		the registered agent are:	
-	DANIEL ZAPATA	Jame	
		· · · · · · · · · · · · · · · · · · ·	
	700 SW 1st ST APT 803 Florida street address (P.O. Box NOT acceptable	<u></u>
1	MIAMI	22120	,
<u>-</u>	City	FL 33 130 Zip	—
liability compa registered agent a statutes relating	iny at the place designati ind agree to act in this co to the proper and compi	ed in this certificate, I herel apacity. I further agree to c lete performance of my duti	vess for the above stated limited by accept the appointment as comply with the provisions of all ies, and I am familiar with and ided for in Chapter 605, F.S

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	
MGR	Daniel Zapata
	700 SW 1st ST APT 803
	Miami. FL 33130
 	
	
 	
(Use attachment if necessary)	
LE V: Other provisions, if any.	gament Conculting Socioop
rative Management and General Mana	gement Consulting Services
·	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE.	/

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.

DANIEL ZAPATA

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)