# L23000249224

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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 Corporations
SUBJECT: Reliable Restoration & Renovation, LLC (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Contact Person)  Reliable Restration 5 Renovation, LLC  (Firm/Company)
1896 Hibiscus Street
Sata Sata, FL 34239 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Daniel Vilatdo at (571) 235-4236 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
S150.00 Filing Fees (\$25 for Conversion and Certificate of Status (\$25 for Articles of Organization)  S150.00 Filing Fees (\$180.00 Filing Fees and Certified Copy (Certified Copy, and Certificate of Status)
Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The 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.

- 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 day of	_20 <u>23</u>
Signature of Authorized Representative of Limi	ted Liability Company:
	-/17/
Signature of Authorized Representative: A	_ Title: Member Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Daniel Marde	
Signature: Annua Caladao	Title: Managel
Printed Name: <u>Name: Vilator</u>	Time: 77120 J 7 4 4 4 4 5
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
C'	
Signature:	Title
Printed Name:	Thic.
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	y rathership.
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ANDI Oction 1 actions.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Reliable Renovation's Restoration LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

**ARTICLE I - Name:** 

**ARTICLE II - Address:** 

The name of the Limited Liability Company is:

The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1896 Hibiscus Street Sarascta, FL 34a39	1896 Hibiscus Street Salasota, FL 34239	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another	
The name and the Florida street address of the re-	egistered agent are:	
Daniel Vilard	<i>(</i> 7.	
Name		
1896 Hibiscu Florida street address (P.O.		
Salasita	FL 34239	
City	FL 34239 Zip	
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S	
Barrier U	Marko May 1,2023	
Registered Agent's Signature (REQUIRÉD)		

(CONTINUED)

# 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  A M PR	Daniel Vilardo 1896 Hibiscus Street Sarasota, FL 34239
Mo-R.	Daniel Vilardo 1896 Hibiscus Street Sarasota, FL 34239
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Daniel	Marlo
This document is executed in accordance wit	authorized representative of a member this section 605.0203 (1) (b). Florida Statutes, I am aware that to the Department of State constitutes a third degree felqny
•••	d or printed name of signee 9 40
\$125.00 Filing Fee for Articles of C \$ 30.00 Certified Copy (Optional)	Organization and Designation of Registered Agent