L23000256883

(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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W23000059435





April 24, 2023

AUGUSTO PERERA, ESQ. AUGUSTO PERERA, P.A. 121 ALHAMBRA PLAZA, SUITE 1500 CORAL GABLES, FL 33134 US

SUBJECT: GLOBAL CHEMOVET, LLC.

Ref. Number: W23000059435

We have received your document for GLOBAL CHEMOVET, LLC. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Signature(s) on behalf of other business entity is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Dil Sultana Regulatory Specialist II

Letter Number: 423A00009131

www.sunbiz.org

COVER LETTER

Division of C	orporations						
SUBJECT: Global C	hemovet, LLC.						
SOBJECT:		sulting Florida L	imited Co	mpany)	_		
	·	_		nd fees are submitted to accordance with s. 605.			her
Please return all corre	espondence concernin	g this matter t	0:				
Augusto Perera, Esq.							
	(Contact Person)						
Augusto Perera, P.A.							
	(Firm/Company)						
121 Alhambra Plaza, S	Suite 1500,						
	(Address)	······					
Coral Gables, FL 3313	34						
((City, State and Zip Code)						
ap@ tmmiami.com							
E-mail Address: (to b	e used for future annual re	port notification	s)			 	
For further information	on concerning this ma	tter, please ca	11:		;" !	2023 EAY 16	""
Augusto Perera, Esq.		_at (³⁰⁵	489	1901		7 =	West Comments
(Name of Conta	ect Person)	(Area Co	ode) (Da	ytime Telephone Number)	— 3888年 - 3888年 - 3888年	PH	
Enclosed is a check f dollars and drawn on	or the following amou a bank located in the	int: (All check United States	(s proces)	sed by this office must	be payabl	15 te 4: 26	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fi and Certified		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Add	ress:			et Address:			
New Filing Section			Filing Section				
Division of Corporations P.O. Box 6327			sion of Corporations Centre of Tallahassee				
1.O. DOX 032	•		1110	centre or runanassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section

Articles of Conversion

For

"Other Business Entity"

linto

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with 8.605.1045. Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Global Chemovet, LLC.	Conversion is:
(Enter Name of Other Business Untity)	
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common laws)	
(Enter entity type: Example: corporation, limited partnership, general partnership, common law of	ir business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of	of the country)
August 2, 2013	
on (date of organization, formation or incorporation)	· 2023
3. The name of the Florida Limited Liability Company as set forth in the attached Articles σ	Organization:
Global Chemovet, LLC.	HAN 6
(Enter Name of Florida Limited Liability Company)	SSER P
4. If not effective on the date of filing, enter the effective date:	ूर् _र म 🔘
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 cale 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 necessarily effective date on the Department of State's records.	ш <u>о</u> д

- 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 14 day of Marci	3 3
Signature of Authorized Representative of Linate	! jalul.t <u>y t ompany:</u>
Signature of Authorized Representative and Name, Guillermo A. Hormo	We have a striber
Signature(s) on behalf of Other Business Entity 1883	. c. ov to required signature(s)
Secondary - Marine	
Printed Name. Walker: W. Rodriguez	Hanager Member
SignaturePrinted Name	•
Signature	
Signate a Control Name Control	
Nighting Committee Committ	
Steatable : Provide Sande : 2000	•
If Florida Corporation: Signature of Chairman, Vice Chairm — Direct of Direct — or Officers have not bee — Cleave	··
It Florida General Partnership or Lamited Loui da Signatu e of ope General Partner	fiks mp.
<u>It Flori ^ta I muted Partnership or Limited I.</u>	Zig Cartino Sang
All others:	
Lges	
Article of Conversion Lees for Florida Articles of Community Littified Copy Vertificate of Status	
· 2131116372 64 20372	· '' '' '' '' '' '' '' '' '' '' '' '' ''

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Global Chemove		ability Company, "L1 (," or "L1 (')	
•	winst contain the words. I limited I i.	ability Company, "LTC, or "LTC)	
ARTICLE II The mailing add		e principal office of the Limited	Liability Company is
Principal Office		Mailing Address:	
970 PARASOLPI	.ACE	970 PARASOLPLACE	
Oviedo, FI 32766		Oviedo, FI 32766	
	WALKIRIA T RODRIGUEZ Name		IZALLAH IZALLAH
			· ·
	970 PARASOL PLACE	DODES NOT assessed to	4S 6
	Florida street address (1	P.O. Box <u>NOT</u> acceptable)	AY 16 PM
	· · · · · · · · · · · · · · · · · · ·	P.O. Box <u>NOT</u> acceptable) FL 32766 Zip	PILED 2023 HAY 16 PM 4: 2: "IAILAHASSEE, FL

(CONTINUED)

ARTICLE IV-

"MGR" = Manager

"AMBR" = Authorized Member

Company:

Title:

AMBR

AMBR

ARTICLE V: Other provisions, if any,		1 7	2023
		LA	HAY
<u>REQUIRED</u> SIGNATURE:	()	AS	9
		SEE,	PH
		- F	ļ: 2

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

Name and Address:

WALKIRIA T RODRIGUEZ

970 PARASOLPLACE

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605,0203 (1) (b). Horida 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.817.455, F.S.

WALKIRIA T RODRIGUEZ

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) | S - 5.00 Certificate of Status (Optional)