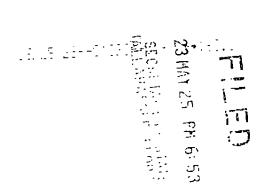


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only





COVER LETTER

Division of Corporations				
SUBJECT: Blve Construction (Name	of Resulting Florida Limited Con	npany)		
The enclosed Articles of Conversion, Business Entity" into a "Florida Limi				r
Please return all correspondence conc	terning this matter to:			
Mardia P Saime (Contact Person)	05			
(Firm/Company)				
268 Astington to	209		231 55.5 (ALL	-9
Haines City, FL (City, State and Zip C	33844 Code)		23 HAY 25	1 men
E-mail Address: (to be used for future an	nual report notifications)		PH 6:53	į,
For further information concerning th	is matter, please call:		. つ. つ	
Claudia P Taimes (Name of Contact Person)	at (<u>663</u>) <u>27</u> (Area Code) (Day	7/- 23 2-7 vtime Telephone Number)		
Enclosed is a check for the following dollars and drawn on a bank located i		sed by this office must be	payable in US	ı
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing and Certificate of Status		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Address: New Filing Section		t Address: Filing Section		

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO: New Filing Section

Articles of Conversion

For

"Other Business Entity"

Into

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 s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of	f Conv	ersion	is:
Blue Construction hight Trace		$\frac{23}{3}$	_
Blve Construction higher Tine. (Enter Name of Other Business Entity)	$\mathcal{T}_{\mathcal{L}}$	23 HAY	
2. The "Other Business Entity" is a <u>Corporation</u>	4:5 	N:	, g. e. e.
(Enter entity type. Example: corporation, limited partnership, general partnership, common la	w or bus	iness tru	st, etç.
First organized, formed or incorporated under the laws of Florida.		<u>a)</u> 	\.\\ \
(Enter state, or if a non-U.S. entity, the name	ie of the	country)
(date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles (Enter Name of Florida Limited Liability Company)	s of Or	ganiza	tion:
4. If not effective on the date of filing, enter the effective date: <u>05-73-2073</u> . (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 ce 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 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.

Signed this 3 day of May	20_23
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: Printed Name: Candia P. Jaimes	Title:
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Edgas Jaimes Printed Name: Edgas Jaimes	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Signature:Printed Name:	Title:
Signature:Printed Name:	<u> </u>
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is	:
Blue los truction to (Must contain the words "Limited Liabil	aht FFC
(Must contain the words "Limited Liabil	(y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	

ARTICLE II - Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mading Address:
268 Adinaton Loos Haines City Ft 33844	768 Aslington Lace. Haines City Fl 33844

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Edgar Jaimes Name	23 MAT SECON
The Action to a toop Florida street address (P.O. Box NOT acceptable)	25 E
Haines City FL 33844 City City Zip	6: 53

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.

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

"MGR" = Manager	
11/2-R	E/ T
	Vagas Jaimes
	11 - A Chapter trop
	Haines Mily, FL 338V K
AMBR	Chardie P. Taimes
,	264 Alloston Laco
	Faires City FL 33 644
	, ,
(Use attachment if necessary)	
,	
LE V: Other provisions, if any.	
• /	
• /	
• /	TACCON INTERPRETATION
LE V: Other provisions, if any.	ECCITATION 25
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
LE V: Other provisions, if any.	25 55 75 75 75 75 75 75 75 75 75 75 75 75
LE V: Other provisions, if any. REQUIRED SIGNATURE:	25
REQUIRED SIGNATURE: Signature of a member or a	n authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance we	n authorized representative of a member with section 605 0203 (1) (b). Florida Statutes, Lam quero that
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance wany false information submitted in a document.	n authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or a This document is executed in a document as provided for in s.817.155, F.S.	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ent to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member or a This document is executed in a document as provided for in s.817.155, F.S.	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ent to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member or a This document is executed in a document as provided for in s.817.155, F.S.	n authorized representative of a member with section 605 0203 (1) (b). Florida Statutes, Lam quero that