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SECRETARY OF STATE

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June 12, 2023

LAZARO PORTOMENE 8500 SW 8 ST STE 266 MIAMI, FL 33144 US

SUBJECT: FIELIVERDADERO SERVICES, LLC

Ref. Number: W23000082162

2023 JUL 18 PM 3: 26

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

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is a limited partnership or limited liability limited partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 223A00013230

2023 JUL 18 PH 4: 11 SECHETARY OF STATE

COVER LETTER

TO: New Filing Section Division of Cor							
SUBJECT: FIELIVERD	ADERO SERVICES, I	LC.					
SUBJECT:	(Name of Resi	alting Florida Li	mited Con	npany)			
The enclosed Articles of Business Entity" into a	of Conversion, Articl "Florida Limited Lis	es of Organiz ability Compa	ation, an iny" in a	d fees are submitted to co ecordance with s. 605.104	onvert an ' 45, F.S.	"Other	-
Please return all corres;	oondence concerning	this matter t	ο:				
LAZARO PORTOMENE							
	(Contact Person)						
TICTAX AND BUSINESS	SERVICES, LLC						
	(Firm/Company)		.				
8500 SW 8 STREET SU	ITE 266						
	(Address)		_				
MIAMI, FLORIDA 33144							
	y, State and Zip Code)						
INFO@TICTAX.ORG	,						
E-mail Address: (to be u	sed for future annual rep	ort notification:	s)				
For further information	concerning this mat	ter, please ca	l 1 :				
LAZARO PORTOMENE		_at (2627	979			
(Name of Contact	Person)	(Area Co	de) (Day	rtime Telephone Number)			
Enclosed is a check for dollars and drawn on a				sed by this office must be	payable i	in US	
(\$25 for Conversion a	D\$155.00 Filing Fees and Certificate of status	☐\$180.00 Fil and Certified (☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status			
Mailing Address New Filing Sect Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations		New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 8 hassee, FL 32303	SECRETARY OF ST	2023 JUL 18 PM 4	

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 Conversion is: FIELIVERDADERO SERVICES, INC
(Enter Name of Other Business Entity)
CORPORATION 2. The "Other Business Entity" is a
FLORIDA First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
10/05/2022 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: FIELIVERDADERO SERVICES, 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.

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Signed this 4th day of	MAY	20 <u>23</u>
Signature of Authorized Rep	oresentative of Limi	acd Liability Company:
Signature of Authorized Repre Printed Name: OSCAR J NUNE	esentative: \(\frac{1}{2}\)	Title: PRESIDENT
Signature(s) on behalf of Oth	er Business Entity:	[See below for required signature(s)]
Signature:	NUNEL	Title: PRESIDENT
Signature:Printed Name:		Title:
Signature:Printed Name:	·	Title:
Signature:Printed Name:		Title:
Signature:Printed Name:		Title:
Signature:Printed Name:		Title:
If Florida Corporation: Signature of Chairman, Vice C If Directors or Officers have no	hairman, Director, or ot been selected, an In	Officer. Icorporator must sign.
If Florida General Partnersh Signature of one General Partn		ity Partnership:
If Florida Limited Partnersh Signatures of ALL General Par	ip or Limited Liabili rtners.	ity Limited Partnership:
All others: Signature of an authorized pers	son.	
Fces:		
Articles of Conversion Fees for Florida Articl Certified Copy: Certificate of Status:		\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•		•	
ARTICLE I - Na	me:		
The name of the L	imited Liability Compan	ıy is:	
FIELIVERDADERO	SERVICES, LLC		
(M	ust contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ldress:	he principal office of the Limited Li	ability Company is:
The mailing addre	SS and Street address of the	ne principal office of the Elimited Eli	
Principal Office 2	Address:	Mailing Address:	
•		40000 CM OF LANE	
16238 SW 95 LANE	<u> </u>	16238 SW 95 LANE MIAMI FL 3396	
MIAMI FL 33196		MICHWITE COOC	
-			
ARTICLE III - R	legistered Agent, Regis	tered Office, & Registered Agent's	s Signature:
(The Limited Liability C	ompany cannot serve as its own active Florida registration.)	Registered Agent. You must designate an indivi	idual of another
•			
The name and the	Florida street address of	the registered agent are:	
	TICTAX AND BUSINESS	S SERVICES, LLC	
		Name	•
	8500 SW 8 STREET SU		
	Florida street address	(P.O. Box NOT acceptable)	
	MIAMI	FL 33144	
	City	· Zip	
	•	-	
Having been na	med as registered agent (and to accept service of process for th	ie above stated limited
liability comp	oany at the place designa	ted in this certificate, I hereby accept	the appointment as ith the provisions of all
registered agent	ana agree to act in this c	capacity. I further agree to comply wa alete performance of my duties, and I	am familiar with and
accept the ol	bligations of my position i	as registered agent as provided for in	Chapter 605, F.S
•		\	
	+1		c 2
	Decistored Agents	S Signature (REQUIRED)	PERETAR'S SECRETAR'S
	Registered Argent's	Signature (NECOMOD)	
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ARTICI	JE IV-
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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	OSCAR J NUNEZ
	16238 SW 95 LANE
·	MIAMI FL 33196
	
	
(Use attachment if necessary)	
	•
ICLE V: Other provisions, if any.	
, /	•
REQUIRED SIGNATURE:	
	an authorized representative of a member

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.

OSCAR J NUNEZ		<u></u> -:2
Typed or pr	rinted name of signee	023 TEC
1	Filing Fees	
\$125.00 Filing Fee for Articles of Organ	ization and Designation of R	egistered Agen
\$ 30.00 Certified Copy (Optional)	\$ 5.00 Certificate of Stat	us (Optional
		.SS