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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: CK FLOORING & REMODELING SERVICES CORP
(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 (Enter state, or if a non-U.S. entity, the name of the country)
01/19/2018
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: CK FLOORING & REMODELING SERVICESL
(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.

Signed this 1 day of AUGUST	20 <u>ე</u> 3
Signature of Authorized Representative	
Signature of Authorized Representative: Printed Name: KAREN PABON	Title: MGR
	ntity: [See below for required signature(s)]
Signature:	
Printed Name: CESAR AUGUSTO OROZCO [DEL VALL Title: VICE PRESIDENT
Signature: William	
Printed Name: KAREN PABON	Title: PRESIDENT
Signature:	
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
Signatura	
Printed Name:	Title:
	CT
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Dire	ctor, or Officer
If Directors or Officers have not been selecte	
ISEN. II C. I.	T. 1.00
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:
_	
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00 ation: \$125.00
Fees for Florida Articles of Organiz Certified Copy:	\$125.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - The name of t	- Name: he Limited Liability Company	y is:	
CK FLOORING	& REMODELING SERVICES L		
	(Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II The mailing a		ne principal office of the Limited	d Liability Company is:
Principal Off	ïce Address:	Mailing Address:	
1001 SPRINGO	DALE CIRCLE	1001 SPRINGDALE CIRCL	.E
PALM SPRING		PALM SPRINGS, FL 33461	
(The Limited Liab) business entity wi		ered Office, & Registered Age Registered Agent. You must designate an i the registered agent are:	
	KAREN PABON		SE
	N	lame	$\frac{c}{cn}$
	1001 SPRINGDALE CIRC	CLE	•
		P.O. Box NOT acceptable)	
	PALM SPRINGS	FL 33461	7: 59
	City	Zip	_
liability o registered a statutes re	company at the place designate gent and agree to act in this callating to the proper and complete obligations of my position a. Registered Agent's	nd to accept service of process for in this certificate, I hereby accupacity. I further agree to complete performance of my duties, and s registered agent as provided for Signature (REQUIRED)	ept the appointment as y with the provisions of ai ad I am familiar with and
	(50:1)	· · · · · · · · · · · · · · · · · · ·	

ARTICLE IV-

KAREN PABON

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	KAREN PABON
	1001 SPRINGDALE CIRCLE
	PALM SPRINGS, FL 33461
MGR	CESAR AUGUSTO OROZCO DEL VALLE
	1001 SPRINGDALE CIRCLE
	PALM SPRINGS, FL 33461
- · · · · · · · · · · · · · · · · · · ·	
	
	
(Use attachment if necessary)	
(ose attachment if necessary)	9
CLE V: Other provisions, if any.	
·	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE.	
NEQUIRED SIGNATURE.	
- Lun	
Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felor

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)