L23000440033

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

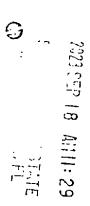
Office Use Only

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COVER LETTER

то:	New Filing S Division of C						
SURI	ECT: MOTEV	O-CO, LLC					
3000		(Name of Re	sulting Florida Li	mited Cor	npanyi	_	
					nd fees are submitted to ecordance with s. 605.1		er
Please	return all corr	espondence concernin	g this matter to):			
CARL	OS ALMONTE						
		(Contact Person)	-				
MOTE	VO-CO, LLC						
		(Firm/Company)					
8862 9	STARHAVEN CO	OVE					
		(Address)					
BOYN	TON BEACH, F	LORIDA 33473					
	((City, State and Zip Code)					
INFO	@MOTEVO.CO						
E-n	nail Address: (to b	e used for future annual re	port notifications)			
For fu	rther informati	on concerning this ma	tter, please cal	1:			
CARL	OS ALMONTE		_at (, 587 <i>-</i>	7062		
	(Name of Conta	act Person)		de) (Day	vtime Telephone Number)	_	
		or the following amou a bank located in the			sed by this office must t	be payable in US	,
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles mization)	□S155.00 Filing Fees and Certificate of Status	□\$180,00 Fili and Certified C		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection forporations 7		New Divis The C 2415	t Address: Filing Section ion of Corporations Jentre of Tallahassee N. Monroe Street, Suite hassee, FL 32303	2810	7973 000 10

INHS11 (7/17)

Articles of Conversion

For

"Other Business Entity"

Into

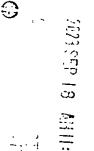
Florida Limited Liability Company

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: MOTEVO-CO, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc."
(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)
NOVEMBER 26, 2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MOTEVO-CO, 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.



Signed this 13TH day of SEPTEMBER	20 23
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: CARLOS ALMONTE	Title: FOUNDER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: (CARLOS ALMONTE	
Printed Name: CARLOS ALMONTE	Title: FOUNDER
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
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

<u> </u>	
liability Company, "L.L.C.," or "LLC.")	
he principal office of the Limited Liability Company	y is:
	,
Mailing Address:	
8862 STARHAVEN COVE	
BOYNTON BEACH, FL 33473	
	8862 STARHAVEN COVE

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

CARLOS ALMONTE	
Namo	2
8862 STARHAVEN COVE	
Florida street address (P.O. Box <u>NOT</u> acceptable)	
BOYNTON BEACH	FL 33473
City	Zip

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)

(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			
MGR	CARLOS ALMONTE 8862 STARHAVEN COVE		
	BOYNTON BEACH, FL 33473		
AMBR .	DEVIN ALMONTE		
	8862 STARHAVEN COVE		
	BOYNTON BEACH, FL 33473		
(Use attachment if necessary)	_		
	3 20 20		
ARTICLE V: Other provisions, if any.	. 23 %		
	: -9		
	<u></u>		
REQUIRED SIGNATURE:			
Call on han	MH: 30		
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony		
CARLOS ALMONTE			

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)

is 11 TEMPLATE

Final Audit Report

2023-09-13

Created:

2023-09-13

Ву:

Carlos Almonte (info@motevo.co)

Status:

Signed

Transaction ID:

CBJCHBCAABAAkWv3-gJAS1MxekiGI-7TF0_Im9iDR_YT

"Inhs11 TEMPLATE" History

Document created by Carlos Almonte (info@motevo.co)

2023-09-13 - 3:03:19 PM GMT

Document emailed to Carlos Almonte (carlos.almonte@motevo.co) for signature

2023-09-13 - 3:05:29 PM GMT

Email viewed by Carlos Almonte (carlos.almonte@motevo.co)

2023-09-13 - 3:08:46 PM GMT

Document e-signed by Carlos Almonte (carlos.almonte@motevo.co)

Signature Date: 2023-09-13 - 3:09:14 PM GMT - Time Source: server

Agreement completed.

2023-09-13 - 3:09:14 PM GMT

