# 123000444993

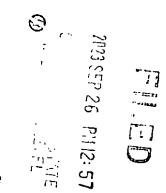
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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07/18/23--0017-508 ++150.00



#### **COVER LETTER**

TO: New Filing Section Division of Corporations					
SUBJECT: Hesajira LLC					
(Name of Res	sulting Florida Lin	iited Con	npany)	_	
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li					n ''Other
Please return all correspondence concernin	g this matter to:	:			
Hector Jimenez					
(Contact Person)					
Hesajira LLC					
(Firm/Company)		_			
1755 E Hallandale Beach Blvd, Unit 2102E					
(Address)		<del></del> -			
Hallandale Beach, FL 33009					
(City, State and Zip Code)					
hesajira@outlook.com					
E-mail Address: (to be used for future annual re	port notifications)	_			
For further information concerning this ma	itter, please call	:			
Hector Jimenez	at (	, 2187	932		
(Name of Contact Person)	(Area Cod	e) (Day	time Telephone Number)	_	
Enclosed is a check for the following amou dollars and drawn on a bank located in the		proces:	sed by this office must	: be payable	e in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$180.00 Filin and Certified Ce	*	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	<u></u>	2023
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New Divis The C 2415	t Address: Filing Section ion of Corporations Jentre of Tallahassee N. Monroe Street, Sui hassee, FL 32303	ite 810 ,	1-11-11 D

## 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:  Hesajira LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company  (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)
12/13/2021 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:
Hesajira 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 21 day of September	_ 20
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: <u>Hector</u> Printed Name: <u>Hector Jimenez</u>	r Jimenez Ville: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Hector Jimenez	
Signature: Hector Jimenez  Printed Name: Hector Jimenez	Title: Manager
Signature:	
Signature:Printed Name:	Title:
Signature	
Signature:Printed Name:	_ Title:
Signature	
Signature:Printed Name:	Title:
Signaturo	
Signature:Printed Name:	Title:
Simplify	
Signature: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 Liability Signatures of <u>ALL</u> 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

::				
ity Company "L.L.	C." or "LLC.")			
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orincipal office	of the Limite	ed Liability Co	mpany	is:
Mailing Address:				
istered Agent. You	must designate an	ent's Signatu individual or anotl	re: ner	
registered age	nt are:			
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vd Unit 2102F				
	cceptable)			
FL 33009	9			
	Zip			
in this certifica acity. I further i e performance (	te, I hereby ac agree to comp of my duties, c	ecept the appoi ply with the pro and I am famili	intment ovisions ar with o	as of all and
) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	Mailing Ac  1755 E Hall Hallandale E  d Office, & R stered Agent. Your registered age  vd, Unit 2102E  O. Box NOT a  FL 33008  to accept servicin this certificate acity. I further to performance of	Mailing Address:  1755 E Hallandale Beach Hallandale Beach FL 3300  ed Office, & Registered Agastered Agent. You must designate an registered agent are:  ne  vd, Unit 2102E  O. Box NOT acceptable)  FL 33009  Zip  to accept service of process in this certificate, I hereby accept the performance of my duties, of proformance of my duties, of the performance of th	Mailing Address:  1755 E Hallandale Beach Blvd, Unit 210 Hallandale Beach FL 33009  ed Office, & Registered Agent's Signatustered Agent. You must designate an individual or another registered agent are:  ne  vd, Unit 2102E  O. Box NOT acceptable)  FL 33009  Zip  to accept service of process for the above sin this certificate, I hereby accept the appoincity. I further agree to comply with the proception of my duties, and I am familing egistered agent as provided for in Chapter	Mailing Address:  1755 E Hallandale Beach Blvd, Unit 210 Hallandale Beach FL 33009  ed Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another registered agent are:  180 Box NOT acceptable) FL 33009 Zip  to accept service of process for the above stated limin this certificate, I hereby accept the appointment acity. I further agree to comply with the provisions appropriate agent as provided for in Chapter 605, F.S.

#### ARTICLE IV-

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				
AMBR	Hector Jimenez			
	1755 E Hallandale Beach Blvd, Unit 2102E			
	Hallandale Beach FL 33009			
MGR	Hector Jimenez			
	1755 E Hallandale Beach Blvd, Unit 2102E			
	Hallandale Beach FL 33009			
	·			
MGR	Sandra Ramirez			
	1755 E Hallandale Beach Blvd. Unit 2102E			
	Hallandale Beach FL 33009			
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	: 223			
(Use attachment if necessary)	1 (a)			
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RTICLE V: Other provisions, if any.				
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Hector Jimenez

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.

Hector Jimenez

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)