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SUBJI	. .	nd Rivera Services Solu	tions LLC						
SUBJI	<u></u>		ulting Florida L	imited Cor	npany)				
		s of Conversion, Artic a "Florida Limited Li	_						Other
Please	return all corre	espondence concerning	g this matter t	o:					
Daniele	e Machado Alve:	S							
		(Contact Person)							
Santos	and Rivera Ser	vices Solutions LLC							
		(Firm/Company)		··· -					
9521 D	elaney Creek B	lvd #121							
		(Address)							
Tampa	, FL 33619								
	((City, State and Zip Code)	 						
santos	rivera.solutions@	gmail.com							
E-m	ail Address: (to be	e used for future annual re	port notification	s)					
For fu	rther information	on concerning this ma	tter, please ca	H:	736				
Daniele	e Machado Alve	S	at (⁴⁰⁷	7473		M			
	(Name of Conta	ct Person)	_ \	ode) (Day	ytime Tel	ephone Number)			
		or the following amou a bank located in the		-	sed by t	his office must	be paya		US
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fil and Certified		Certifi	5.00 Fiting Fees, ed Copy, and cate of Status	SECRETURY TALLAMA	2023 SEP 25	
	Mailing Adda New Filing Se Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		New Divis The C 2415	Centre o N. Mon		SSEE, FL 810	PH 3: 57	

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 Santos and Rivera Services Solutions Corp	s of Conversion is:
(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	name of the country)
09/18/2017 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articl Santos and Rivera Services Solutions LLC	les of Organization:
(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 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 v document's effective date on the Department of State's records.	will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statutes.	THE POST OF THE PO
 The "Converted or Other Business Entity" has agreed to pay any members having appraisal which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	

Signed	this 12th	day of September	20 23		
Signat	ure of Author	ized Representative of Li	mited Liability Company:		
Signat Printed	ure of Authoriz I Name: <u>Daniele</u>	ed Representative: Day Machado Alves	Title: AP	_	
			: [See below for required signature(s		
Signati Printec	ure: <u>Dom</u> I Name: Daniele	i ele AlVes Machado Alves	Title: Vice President		
Simot	10 c	Charte.			
Printed	l Name: Kelvin d	a Costa Santos	Title: President		
Signati Printed	ure: I Name:		Title:		
Signati	ure:		m: 1		
Printed	i Name:		Title:		
Signate Printed	ure: l Name:		Title:		
Signat	ure:			_	
Printed	l Name:		Title:		
Signat		on: n, Vice Chairman, Director, o s have not been selected, an			
	rida General Pa ure of one Gene	artnership or Limited Liab eral Partner.	oility Partnership:		
	ida Limited Pa ures of <u>ALL</u> Ge	artnership or Limited Liab eneral Partners.	ility Limited Partnership:		
All oth Signat	ners: ure of an author	ized person.		2023 5-3C 17A	
Fees:				SEP LLA	
	Articles of Co Fees for Flori Certified Cop Certificate of	da Articles of Organization y:	\$25.00 : \$125.00 \$30.00 (Optional) \$5.00 (Optional)	25 PH 3: 57	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Santos and Rivera Services Solutions LLC				
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
9521 Delaney Creek Blvd #121 Tampa, FL 33619	9521 Delaney Creek Blvd #121			
Тапра, гс 33019	Tampa, FL 33619			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re Daniele Machado Alves	ered Agent. You must designate an individual or another			
Name				
9521 Delaney Creek Blvd #12	<u> </u>			
Florida street address (P.O.	Box NOT acceptable)			
Tampa	FL 33619			
City	Zip			
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg	accept service of process for the above stated limited this certificate. I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and distered agent as provided for in Chapter 603, F.S. Chado AIVES. ature (REQUIRED)			

(CONTINUED)

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	Daniele Machado Alves	
	9521 Delaney Creek Blvd #121	
	Tampa, FL 33619	
AMBR	Kelvin da Costa Santos	
AMDA	9521 Delaney Creek Blvd #121	
	Tampa, FL 33619	
	rampa, 1 L 00019	
(Use attachment if necessary)		
ARTICLE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
D	-1 - 1 - 0 - 1 - 0	
<u>Janiele Ma</u>	chade Alves	
This document is executed in accord	r or an authorized representative of a member dance with section 605.0203 (1) (b). Florida Statutes. I am aware that document to the Department of State constitutes a third degree felons	
maiole M	achade Alves	
_ samer n	Typed or printed name of signee	
	Typed of printed name of signed	
\$125.00 Filing Fee for Artic	Filing Fees cles of Organization and Designation of Registered Agent	1
\$ 30.00 Certified Copy (Op	or or burniaged and problem on or register ed-agent.)
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