L23000507058

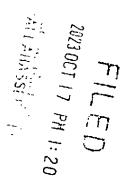
(Re	questor's Name)	
(Ad	dress)	-
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
,	•	

Office Use Only



000418283100

10/17/23--01005--009 **150.00



COVER LETTER

TO:	New Filing S Division of t	Section Corporations			
SUBJ	ECT: POOL I	NMOBILIARIO LLC			
		(Name of Re	sulting Florida Lim	ited Co	mpany)
The en Busin	nclosed Article ess Entity" inte	es of Conversion, Artico o a "Florida Limited L	cles of Organizat	ion, ai y" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	retum all con	respondence concernir	ng this matter to:		
LORE	NZI, CARLOS				
POOL	INMOBILIARIO	(Contact Person) CORP		_	
		(Firm/Company)		_	
1603 V	V Harmony Lak		··· -	_	
Davie,	FL 33324	(Address)			
joaquir	(n@consultingfire	City, State and Zip Code) stchoice.com		-	
E-m	ail Address: (to b	oc used for future annual re	port notifications)	~	
For fur	ther informati	on concerning this ma	tter, please call:		
	n Navarro		_at (385	, 2083	393
	(Name of Conta	act Person)	(Area Code)	(Day	rtime Telephone Number)
Enclos dollars	ed is a check f and drawn on	for the following amou a bank located in the	int: (All checks p United States)	rocess	sed by this office must be payable in US
(\$25 for & \$125	.00 Filing Fees Conversion for Articles tization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New I Divisi The C	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Conversion

For

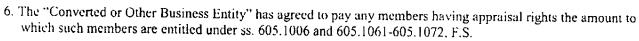
"Other Business Entity"

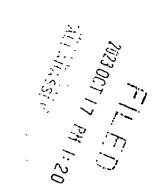
Into

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: POOL INMOBILIARIO 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.
(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. entiry, the name of the country)
10/22/2018
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: POOL INMOBILIARIO LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
() he 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.





Signed this 10	day of October	
	norized Representative of Lim	
Signature of Author Printed Name: LOR	orized Representative: ENZI, CARLOS	Title: President-Director
Signature(s) on be	half of Other Business Entity:	[See below for required signature(s)]
Signature:		
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature:		Title:
rrinted Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature:		
Printed Name:		Title:
If Florida Corpora		
Signature of Chairm If Directors or Office	nan, Vice Chairman, Director, or ters have not been selected, an In	Officer.
		, -
If Florida General Signature of one Ge	Partnership or Limited Liabili neral Partner.	ty Partnership:
If Florida Limited Signatures of <u>ALL</u> (Partnership or Limited Liabili General Partners.	ty Limited Partnership:
All others: Signature of an auth	orized person.	
Fees:		
Articles of C Fees for Flo Certified Co Certificate of	orida Articles of Organization: opy:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

70230CT /7 PH 1:20

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	eny is:
POOL INMOBILIARIO LLC	
	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1603 W Harmony Lake Circle	1603 W Harmony Lake Circle
Davie, FL 33324	Davie, FL 33324
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
FCC Consulting LLC	
1	Name
6815 Biscayne Blvd Ste	103132
Florida street address	(P.O. Box NOT acceptable)
Miami	_{F[} 33138
City	Zip
registered agent and agree to act in this constant the statutes relating to the proper and compacted the obligations of my position and Registered Agent's,	and to accept service of process for the above stated limited ted in this certificate. I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S. Signature (REQUIRED)

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	
AMBR	Laranzi Carlas
	Lorenzi, Carlos
	1603 W Harmony Lake Circle Davie, FL 33324
	Davie, FL 33324
AMBR	MARTINEZ, MONICA
	1603 W Harmony Lake Circle
	Davie, FL 33324
	11-11-1-1
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
	CLi
.E. V: Other provisions, if any.	CL
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605 0203 (1) (b) Election 505 0203 (1)
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605 0203 (1) (b) Election 505 0203 (1)
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Lorenzi, Carlos	//