L2300053454

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

Office Use Only



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RECEIVED

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/01/2023

NAME: MIRACLE CAR RENTAL, LLC

TYPE OF FILING: CONVERSION

COST:

150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

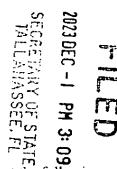
AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: MIRACLE CAR RENTAL LLC		
(Name of R	Resulting Florida Limi	ed Company)
The enclosed Articles of Conversion, Art Business Entity" into a "Florida Limited		on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concern	ing this matter to:	
ANTHONY KOGAN		
(Contact Person)		
ACTONY INC		
(Firm/Company)		
2424 N FEDERAL HWY STE 411		
(Address)		
BOCA RATON, FL 33431		
(City, State and Zip Code	:)	
INFO@ASGTAX.COM		
E-mail Address: (to be used for future annual	report notifications)	
For further information concerning this m	natter, please call:	
ANTHONY KOGAN	at (⁵⁶¹	843-0219
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the		rocessed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	and Certified Cop	Fees S185.00 Filing Fees, y Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 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.

MIRACLE CAR RENTAL INC
(Enter Name of Other Business Emity)
2. The "Other Business Entity" is a
(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)
11/01/2023 on
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MIRACLE CAR RENTAL 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.)
<u>Note:</u> 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 29th day of November	20 23 <u>. </u>		
Signature of Authorized Representative of Li			
Signature of Authorized Representative:Printed Name: FAINA UCHITEL	Title: PRESIDENT	_	
Signature(s) on behalf of Other Business Entity			
Signature:	·	702 202	
Signature:	Title: PRESIDENT	- 155 30	
		SECKETARY C	
Signature:		- AS	7
Signature: Printed Name:	Title:	PH 3: 09 OF STATE SEE, FL	13
Sionature		EST W	Ö
Signature:Printed Name:	Title:	A.T.E	•
Signature:Printed Name:	(2),1		
Printed Name:	Title:	_	
Signature:			
Signature:Printed Name:	Title:	_	
Ci cranco			
Signature:Printed Name:	Title	-	
Timed Name.	Thic.	_	
If Florida Corporation:			
Signature of Chairman, Vice Chairman, Director.			
If Directors or Officers have not been selected, an	Incorporator must sign.		
If Florida General Partnership or Limited Liab	oility Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Liab	oility Limited Partnership:		
Signatures of ALL General Partners.			
All others:			
Signature of an authorized person.			
<u>Fees:</u>			
And the ACC and the	625.00		
Articles of Conversion: Fees for Florida Articles of Organization	\$25.00 n: \$125.00		
Certified Copy:	\$125.00 \$30.00 (Optional)		
Certificate of Status:	\$5.00 (Optional)		
	, = t		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compar	ny is:	
MIRACLE CAR RENTAL LLC		
(Must contain the words "Limited I	Liability Company, "L.H.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of t	the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address: 17150 N BAY RD UNIT 2306 SUNNY ISLES, FL 33160	
17150 N BAY RD UNIT 2306	17150 N BAY RD UNIT 2306	
SUNNY ISLES, FL 33160	SUNNY ISLES, FL 33160	
	tered Office, & Registered Agent's Signature Registered Agent. You must designate an individual scannote.	
	the regime on agent are.	
FAINA UCHITEL Name		
17150 N BAY RD UNIT 2	2306	
Florida street address	(P.O. Box NOT acceptable)	
SUNNY ISLES	FL 33160	
City	Zip	
Having have named as surjetored ment a	and to accept service of wovess for the above stated limite	

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)

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FAINA UCHITEL

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	UCHITEL, FAINA 17150 N BAY RD UNIT 2306 SUNNY ISLES, FL 33160
	SECRETAL SECRETARIA
	ASSEE ST
(Use attachment if necessary)	3:09 STATE FI
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	euty
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

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)