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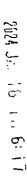
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Articles of Conversion

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.

is:
st, etc.
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after
after the
int to

Signed this 1ST day of NOVEMBER	20 <u>1</u> 3
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative: Printed Name: ANSISER Sources Signature(s) on behalf of Other Business Entity: 15	Title: MDn2 See below for required signature(s)
Signature: Onshut Jourge Printed Name: NSISERTO COPMEGO	Title: PRESIDENT
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Printed Name.	
Signature:Printed Name:	
Signature:	••
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liability Signature of one General Partner.	corporator must sign.
If Florida Limited Partnership or Limited Liabilit 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

		(I LOIGHT KANTILD KALL		
The name of the	ame: Limited Liability Compan	y is:		
EL SEGUNDO TA				_
()	Aust contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")		
ARTICLE II - A The mailing addr	Address: ess and street address of the	he principal office of the Limited	l Liability	Company is:
Principal Office	Address:	Mailing Address:		
1016 E OSCEOLA		1016 E OSCEOLA PARKW KISSIMMEE, FL 34744	AY	_
KISSIMMEE, FL 3	4/44	KISSIMINIEE, FL 34744		
business entity with a	n active Florida registration.) e Florida street address of ANSBERTO BORREGO			
		Name		
	1016 E OSCEOLA PARI	(WAY		
		(P.O. Box NOT acceptable)		
	KISSIMMEE	FL 34744		
	City	Zip		
liability con registered agen statutes relat	npany at the place designant and agree to act in this cling to the proper and compobligations of my position	and to accept service of process for ted in this certificate, I hereby acc capacity. I further agree to compl plete performance of my duties, an as registered agent as provided for	cept the ap _i ly with the _i nd I am fan	pointment as provisions of all niliar with and eer 605, F.S
	Unstito_	s Signature (REQUIRED)	:	202 4 J.
	Registered Agent's	s Signature (REQUIRED)		<u>`</u> .
	(CON	NTINUED)		-
			*1	<u>ئ</u>

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	MANDED INC
MGR	MANBER INC
	13661 BEHRING AVE ORLANDO, FL 32827
	ORLANDO, FL 32827
MGR	DANBORR INC
	13387 GLACIER NATIONAL DR
	ORLANDO, FL 32837
MGR	AER RACHED HOLDINGS LLC
WIGK	2501 N ORANGE BLOSSOM TRL APT 381
	ORLANDO, FL 32804
(Use attachment it`necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
LE V: Other provisions, if any.	ΚΦ
LE V: Other provisions, if any. REQUIRED SIGNATURE: Cushute Tours	
REQUIRED SIGNATURE: Signature of a member of	r an authorized representative of a member
REQUIRED SIGNATURE: Cushute Tours Signature of a member of This document is executed in accordant.	r an authorized representative of a member ce with section 605,0203 (1) (b), Florida Statutes, I am aware t
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordan any false information submitted in a do	
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordan any false information submitted in a do as provided for in s.817.155, F.S.	er an authorized representative of a member ce with section 605.0203 (1) (b). Florida Statutes. I am aware to the Department of State constitutes a third degree fellows.
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. ANSIECTO	er an authorized representative of a member ce with section 605.0203 (1) (b). Florida Statutes. I am aware to the Department of State constitutes a third degree fellows.