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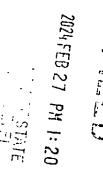
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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<u>.</u>		
Special Instructions to I	Filing Officer:	

Office Use Only



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02/27/24~-01007--016 \*\*150.00





# **COVER LETTER**

Division of C							
SUBJECT: IMAES	CONSTRUCTION INC						
SOBJECT.		sultin	g Florida Lim	ited Cor	npany)		- :
The enclosed Article Business Entity" into	es of Conversion, Artic o a "Florida Limited L	les d iabil	of Organizat ity Compan	ion, ar y" in a	nd fees are submitted to con- ccordance with s. 605.1045.	vert an "O , F.S.	ther .
Please return all corr	espondence concernin	g thi	s matter to:				
HEIDY PENA							
· · · · · · · · · · · · · · · · · · ·	(Contact Person)		-,	_			
IMAES CONSTRUCT	ION INC						
	(Firm/Company)			_			
2315 FERN CIRCLE							
	(Address)			_			
TAMPA FL 33604							
(	City. State and Zip Code)			_			
CAROLINAPEITA@G	MAIL.COM						
E-mail Address: (to b	e used for future annual re	port i	notifications)	_			
For further informati	on concerning this ma	tter,	please call:				
HEIDY PENA		at	(813	\323-(	0954		•
(Name of Conta	act Person)	aı	(Area Code	) (Day	rtime Telephone Number)		
Enclosed is a check to dollars and drawn on	for the following amou a bank located in the	nt: ( Unit	All checks ped States)	process	sed by this office must be pa	yable in U	JS
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7			New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303	2024 FEB 27 PH 1: 20	

## **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.

IMAES CONSTRUCTION INC +23 O(D) 1852 (Enter Name of Other Business Entity)	
2. The YOther Purious Factory CORPORATION	
2. The "Other Business Entity" is a	te.
First organized, formed or incorporated under the laws of	,
(Enter state, or it a non-U.S. entity, the name of the country).	
01/05/2023 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	
IMAES CONSTRUCTION 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 afte 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.	r
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.	)
2024	
2024 FEB 27	2. E

Signed this 21 day of FEBRUARY 2024	
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: HEIDY PENA	Title: PRESIDENT
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: HEIDY PENA	2050/05/15
Signature: Linsy Latino C Pena	Title: PRESIDENT
Printed Name: LINSY INDIRA CANALES PENA	Title: VICEPRESIDENT
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y 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)

2024 FEB 27 PM 1: 20

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ame.			
	ny is:		
JCTION LLC			
Must contain the words "Limited I	Liability Company, "I	L.L.C.," or "LLC.")	<del></del>
Address: ress and street address of t	he principal offi	ice of the Limite	ed Liability Company is:
Address:	Mailing	Address:	
LE	2315 FEF	RN CIRCLE	
	TAMPA FL 33604		
Company cannot serve as its own in active Florida registration.) e Florida street address of	Registered Agent, Ye	ou must designate an	individual or another
	Name		
2315 FERN CIRCLE			
<del></del>	(P.O. Box NOT	acceptable)	
TAMPA	FL <sup>336</sup>	604	
City		Zip	
npany at the place designate and agree to act in this coing to the proper and composition a policy position a second second and the Registered Agent's	ted in this certificapacity. I further letter performance as registered age	cate, I hereby acc or agree to compl e of my duties, ar ont as provided fo	cept the appointment as ly with the provisions of all nd I am familiar with and
	Address: ress and street address of the Address: ress and street address of the Address: LE  Registered Agent, Regis Company cannot serve as its own in active Florida registration.) refered Florida street address of the HEIDY PENA  2315 FERN CIRCLE Florida street address TAMPA  City  Cit	Limited Liability Company is:  JCTION LLC  Must contain the words "Limited Liability Company." I  Address:  ress and street address of the principal office Address:  LE  2315 FEF  TAMPA F  Registered Agent, Registered Office, & Company cannot serve as its own Registered Agent. You active Florida registration.)  Florida street address of the registered a HEIDY PENA  Name  2315 FERN CIRCLE  Florida street address (P.O. Box NOT)  TAMPA  City  TAMPA  L  City  Tamed as registered agent and to accept serupany at the place designated in this certificate and agree to act in this capacity. I further and to the proper and complete performance abbligations of nity position as registered agent.	DCTION LLC  Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")  Address:  ress and street address of the principal office of the Limited Address:  Registered Agent, Registered Office, & Registered Agent TAMPA FL 33604  Registered Agent, Registered Office, & Registered Agent You must designate an in active Florida registration.)  re Florida street address of the registered agent are:  HEIDY PENA  Name  2315 FERN CIRCLE  Florida street address (P.O. Box NOT acceptable)  TAMPA  FL  TAMPA  FL  Tampa agree to act in this capacity. I further agree to company at the place designated in this certificate, I hereby act at and agree to act in this capacity. I further agree to company to the proper and complete performance of my duties, an abbligations of my position as registered agent as provided for Registered-Agent's Signature (REQUIRED)

#### **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	•
MANAGER	HEIDY PENA
	2315 FERN CIRCLE
	TAMPA FL 33604
MANAGER	LINSY INDIRA CANALES PENA
	2315 FERN CIRCLE
	TAMPA FL 33604
	<del></del>
<del></del>	
	<del></del>
	<del>-</del>
(Use attachment if necessary)	
•	
TICLE V: Other provisions, if any.	
vi ome provisions, it any.	
· · · · · · · · · · · · · · · · · · ·	
DECLUDED OLGALATION	<del></del>
REQUIRED SIGNATURE: ///	
$\mathbb{V}_{I}$	
	U-lless
<u> </u>	1) //
Signature of a member or a	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 docur	ment to the Department of State constitutes a third degree felong

**HEIDY PENA** 

as provided for in s.817.155, F.S.

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)



# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees:

\$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional):

\$30.00

Certificate of Status (optional):

\$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

#### 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

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605,0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)

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通知的 法好好

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Department of State / Division of Corporations / Search Records / Search by Entity Name /

# **Detail by Entity Name**

Florida Profit Corporation
IMAES CONSTRUCTION INC

**Elling Information** 

**Document Number** 

P23000001852

FEI/EIN Number

92-1701515

**Date Filed** 

01/05/2023

Effective Date

01/03/2023

State

FL

**Status** 

**ACTIVE** 

#### Principal Address

2315 FERN CIRCLE TAMPA, FL 33604

#### Mailing Address

2315 FERN CIRCLE TAMPA, FL 33604

#### Registered Agent Name & Address

PENA, HEIDY

2315 FERN CIRCLE

**TAMPA, FL 33604** 

#### Officer/Director Detail

Name & Address

Title P

PENA, HEIDY 2315 FERN CIRCLE TAMPA, FL 33604

Title VP

CANALES PENA, LINSY INDIRA 2315 FERN CIRCLE TAMPA, FL 33604

#### **Annual Reports**

Report Year

Filed Date

2/21	/24.	1:05	PM

Detail by Entity Name

2024

02/21/2024

## Document Images

02/21/2024 -- ANNUAL REPORT View image in PDF format

01/05/2023 - Domestic Profit

View Image in PDF format

Honda Lepa thent of Mark, Division of Corporation

### 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23000001852

**Entity Name: IMAES CONSTRUCTION INC** 

**Current Principal Place of Business:** 

2315 FERN CIRCLE TAMPA, .FL 33604

**Current Mailing Address:** 

2315 FERN CIRCLE TAMPA, FL 33604

FEI Number: 92-1701515

Certificate of Status Desired: No

**FILED** 

Feb 21, 2024 Secretary of State

7755993424CC

Name and Address of Current Registered Agent:

2315 FERN CIRCLE TAMPA, FL 33604 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title

Title

VΡ

Name

PENA, HEIDY

Name

CANALES PENA, LINSY INDIRA

Address

2315 FERN CIRCLE

Address

2315 FERN CIRCLE

City-State-Zip: TAMPA FL 33604

City-State-Zip: TAMPA FL 33604

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oeth; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HEIDY PENA

**PRESIDENT** 

02/21/2024