L24000184600

(Re	equestor's Name)	
(Ad	idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	







000427741410

04/17/24--01003--008 **180.00



COVER LETTER

TO:	New Filing Section Division of Corporations			
SUBJ	ECT: LVP2B CORPORATION			
3020		ulting Florida Lim	ited Con	peny)
The en	nclosed Articles of Conversion, Articles Entity" into a "Florida Limited Li	les of Organizat ability Compan	ion, an y'' in ac	d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	return all correspondence concerning	g this matter to:		
GESS	IMBERGUE MONTEIRO			
	(Contact Person)		-	
G.S. N	MONTEIRO LAW			
	(Firm/Company)			
848 B	RICKELL AVENUE, SUITE 203			
	(Address)		_	
MIAM	I, FL 33131			
	(City, State and Zip Code)			
	teiro@gsmonteirolaw.com		_	
E-n	nail Address: (to be used for future annual re-	port notifications)		
For fu	orther information concerning this man	tter, please call:		
Idann	ys Arteaga	_at (946~	4667
	(Name of Contact Person)	(Area Code) (Day	time Telephone Number)
	sed is a check for the following amous and drawn on a bank located in the		process	sed by this office must be payable in US
(\$25 fc	0.00 Filing Fees on Conversion anization) \$\int_{0.00}^{\text{Filing Fees}} = \int_{0.00}^{\text{Filing Fees}} = \int_{0	\$180.00 Filing and Certified Co	_	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Malling Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New I Divisi The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

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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: LVP2B CORPORATION
(Enter Name of Other Business Entity)
CORPORATION 2. The "Other Business Entity" is a [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. entity, the name of the country)
NOVEMBER 15, 2023
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: LVP2B 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.) 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.

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.



Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: Printed Name: Blanca Senna Lalli Nery Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Blanca Senna Lalli Nery Title: DIRECTOR
Printed Name: BIANCA SENNA LALLI NERY Title: MANAGER Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Printed Name: BIANCA SENNA LALLI NERY Title: MANAGER Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: All
Signature: All
Signature: Title DIRECTOR
SIGNATURE. THE DIRECTOR
PRINTED PARTIE: DIVING SERIAL CALLI RELITE THE THE PRINTED FOR
Timod Ivanic.
Signature:
Printed Name: Title:
Signature:
Printed Name:Title:
Signature:
Printed Name:Title:
111100
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 Incorporator must sign.
If Florida General Partnership or Limited Liability Partnership:
Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership:
Signatures of ALL General Partners.
Signature of Signature of States of
All others:
Signature of an authorized person.
Fees:
Articles of Conversion: \$25.00
Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Name: e Limited Liability Company	y is:
LVP28 LLC		
	(Must contain the words "Limited Li	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - The mailing add		he principal office of the Limited Liability Company is:
rincipal Offic	e Address:	Mailing Address:
348 BRICKELL	AVENUE, SUITE 203	848 BRICKELL AVENUE, SUITE 203
MIAMI, FL. 3313		MIAMI, FL 33131
The Limited Liability business entity with	ty Company cannot serve as its own I n an active Florida registration.)	tered Office, & Registered Agent's Signature: Registered Agent, You must designate an individual or another
The name and t	he Florida street address of	the registered agent are:
	BIANCA SENNA LALLI N	VERY
	Ŋ	Vame
	13540 SW 74TH PLACE	
	Florida street address	(P.O. Box NOT acceptable)
	PINECREST	FL 33156
	City	Zip
	ompany at the place designat	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as
liability co registered ag statutes rela	ent and agree to act in this co ating to the proper and comp	apacity. I further agree to comply with the provisions of all elete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S
liability co registered ag statutes rela	ent and agree to act in this conting to the proper and comp e obligations of my position a	apacity. I further agree to comply with the provisions of all selete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S

<u> Fitte:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager MGR	BIANCA SENNA LALLI NERY
	13540 SW 74TH PLACE
	PINECREST, FL 33156
(Use attachment if necessary)	
REQUIRED SIGNATURE:	ly
This document is executed in accordance any false information submitted in a document provided for in 8.817.155, F.S.	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 A SNA IAU MEXY
	ped or printed name of signee
•	所ting Fees
\$125.00 Filing Fee for Articles 6 \$ 30.00 Certified Copy (Option	of Organization and Designation of Registered Agent (all) \$ 5.00 Certificate of Status (Optional)