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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

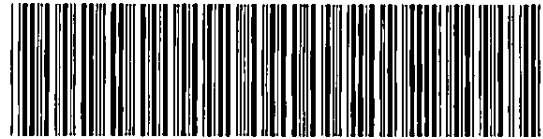
(Document Number)

Certified Copies _____

Certificates of Status _____

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RECEIVED
OFFICE OF STATE
CLERK

T.J.H.
S30124

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Zarrilli & Galvis LLC
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Cario Zarrilli Contreras
(Contact Person)

Caryuf
(Firm/Company)

3209 Armstrong Spring Dr.
(Address)

Kissimmee FL 34744
(City, State and Zip Code)

zarrilligalviscorporation@gmail.com
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Airam Galvis Villamizar at (321) 2405420
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

| | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | <input type="checkbox"/> \$155.00 Filing Fees and Certificate of Status | <input type="checkbox"/> \$180.00 Filing Fees and Certified Copy | <input type="checkbox"/> \$185.00 Filing Fees, 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

FILED

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:

Zarrilli & Galois
(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.)

First organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on 04/18/2022
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

Zarrilli & Galois LLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: 06/01/2024.

(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.

FILED
MAY 15 2024
DEPT. OF STATE

Signed this 09 day of May 2024.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: _____

Printed Name: Canio Zarilli

Title: General Partners

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: _____

Printed Name: Alison Galois

Title: General Partners

Signature: _____

Printed Name: _____

Title: _____

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 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.

All others:

Signature of an authorized person.

Fees:

| | |
|--|--------------------|
| Articles of Conversion: | \$25.00 |
| Fees for Florida Articles of Organization: | \$125.00 |
| Certified Copy: | \$30.00 (Optional) |
| Certificate of Status: | \$5.00 (Optional) |

FILED
MAY 15 PM 1:11
CLERK OF DISTRICT COURT
JUDICIAL CIRCUIT IN AND FOR THE
NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Zarrilli & Galvis, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3209 Armstrong Spring
Dr. Kissimmee, FL
34744

Mailing Address:

3209 Armstrong Spring
Dr. Kissimmee, FL
34744

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Cynthia Soto

Name

797 W. Lancaster Rd

Florida street address (P.O. Box **NOT** acceptable)

ORLANDO

City

FL 32809

Zip

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.,

Cynthia Soto

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
JAN 10 2010
CLERK OF DISTRICT COURT
STATE OF FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR.

AMBR.

Name and Address:


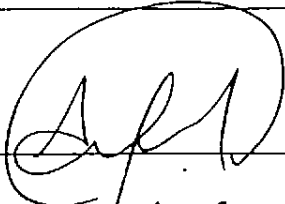
Carlo Zarrilli Contreras
3209 Armstrong Spring Dr.
Kissimmee FL 34749

Airam Galvis Villamizar
3209 Armstrong Spring Dr.
Kissimmee FL 34749

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

 / 

Signature of a member or 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 document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Carlo Zarrilli Contreras / Airam Galvis Villamizar
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)

FILED

**Electronic Articles of Incorporation
For**

P22000033349
FILED
April 18, 2022
Sec. Of State
tscott

ZARRILLI&GALVIS CORPORATION

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

ZARRILLI&GALVIS CORPORATION

Article II

The principal place of business address:

10344 FALCON PARC BLVD 4 204
ORLANDO, FL. 32832

The mailing address of the corporation is:

10344 FALCON PARC BLVD 4 204
ORLANDO, FL. 32832

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

100

Article V

The name and Florida street address of the registered agent is:

BLANCA ZAMBRANO
1266 SW 115 WAY
DAVIE, FL. 33325

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: BLANCA ZAMBRANO

FILED
APR 18 2022
CLERK OF STATE

P22000033349
FILED
April 18, 2022
Sec. Of State
tscott

Article VI

The name and address of the incorporator is:

CANIO GUISEPPE ZARRILLI CONTRERAS
10344 FALCON PARC BLVD 4 204

ORLANDO, FL 32832

Electronic Signature of Incorporator: CANIO GUISEPPE ZARRILLI CONTRERAS

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
CANIO G ZARRILLI CONTRERAS
10344 FALCON PARC BLVD 4 204
ORLANDO, FL 32832

Title: VP
AIRAM GALVIS DE ZARRILLI
10344 FALCON PARC BLVD 4 204
ORLANDO, FL 32832

Article VIII

The effective date for this corporation shall be:

04/18/2022

FILED
APR 18 2022
SECRETARY OF STATE