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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO:	New Filing So Division of C					
ST'D I	SCT. ACE QU	ALITY PRODUCTS LLC	:			
SOBJ	EC1	(Name of Res	sulting Florida Lin	nited Cor	mpany)	
The en	nclosed Article ess Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organiza ability Compa	ation, an ny" in a	nd fees are submitted to convert an "Oth accordance with s. 605.1045, F.S.	c
Please	return all corre	espondence concernin	g this matter to	:		
LUIS	ALEJANDRO TO	RRES PAYOT				
		(Contact Person)		_		
		(Firm/Company)		_		
109 T.	ANBARK TL			_		
		(Address)				
WELL	INGTON, FLOR			_		
Itpayo	((t@gmail.com	City, State and Zip Code)				
		e used for future annual re	port notifications)			
For fu	rther information	on concerning this ma	iter, please call	:		
LUIS	ALEJANDRO TO	PRRES PAYOT	_at (3073	3556	
	(Name of Conta	ct Person)	(Area Cod	le) (Day	ytime Telephone Number)	
		or the following amou a bank located in the		proces	sed by this office must be payable in US	5
(\$25 fo & \$125	0.00 Filing Fees or Conversion is for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filinand Certified C		S185.00 Filing Fees. Certified Copy, and Certificate of Status	
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The (2415	Et Address: Filing Section Sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: ACE QUALITY PRODUCTS LLC
(Enter Name of Other Business Entity)
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-L.S. entity, the name of the country)
MAY 12th 2016
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ACE QUALITY PRODUCTS 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.

Signed this 01 day of APRIL	2024 .
Signature of Authorized Representative of Lim	ifed Liability Company:
Signature of Authorized Representative: Printed Name: LUIS ALEJANDRO TORRES PAYOT	Title: MEMBER-MANAGER
Signature(s) on tehalf of Other Business Entity:	! /
Signature: Justin ALEJANDRO TORRES PAYOT	THE MEMBER MANAGER
Printed Name: GOIS ACES, AND TO TORNES PATOT	Title: MEMBER-MANAGER
Signature:	
Printed Name:	Title:
Signatura	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Tisles
Printed Name:	rme
If Florida Corporation:	
Signature of Chairman. Vice Chairman. Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin
Signature of one General Partner.	C racincionip.
If Florida Limited Partnership or Limited Liability	tv 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KIICLESOF	ONGRIZATIONION	T EOMDA CEMITED EIA	DILIT COMMITT
ARTICLE I - N		•	
he name of the	Limited Liability Company	1S:	
ACE QUALITY P			
(Mast contain the words "Limited La	ability Company, "L. L.C.," or "LLC,")	
ARTICLE II - 2	Address:		
The mailing add	ress and street address of th	e principal office of the Limite	ed Liability Company is:
		9.5 M. A.1.7	
Principal Office	Address:	Mailing Address:	
109 TANBARK TI	WELLINGTON	109 TANBARK TE WELLI	NGTON
FLORIDA 33414		FLORIDA 33414	
			
ARTICLE III -	Registered Agent, Registe	ered Office. & Registered Ag	ent's Signature:
The Limited Liability	Company cannot serve as its own R	legistered Agent. You must designate an	individual or another
business entity with	m active Florida registration.)		
The name and th	e Florida street address of t	he registered agent are:	
	LTP GROUP INC		
		ame	
	• • •		
	109 TANBARK TL		
	Florida street address (P.O. Box <u>NOT</u> acceptable)	
	WELLINGTON	FI 33414	
	City	Zip	
tt. to tour		nd to accept service of process,	for the above stated limited
Having oven i liability cov	iamea as regisierea ageni ai noany at the nlace designate	ed in this certificate. Thereby a	ccept the appointment as
registered age.	n and agree to act in this ca	pacity. I further agree to comp	oly with the provisions of a
statutes relat	ing to the proper and comp	ete performance of my duties, a	md Lam familiar with and
accept the	obligations of my position a	registered agent as provided)	for in Chapter 605. F.S
	1/01	\ \ \ \	
	They	WT	
	Registered Agent's	Signature (REQUIRED)	÷ 59
			1924
	(COX	TINUED)	## F
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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	LUIC ALE JANDOO TORRES BAYOT
AMBR	LUIS ALEJANDRO TORRES PAYOT
	109 TANBARK TL WELLINGTON
	FLORIDA 33414
MGR	LUIS ALEJANDRO TORRES PAYOT
	109 TANBARK TL WELLINGTON
	FLORIDA 33414
MGR	DANIEL FINOL
	1015 N RIO VISTA BLVD FORT LAUDERDALE
	FLORIDA 33301
(Use attachment if necessary)	
103c attachinent it necessary	
LE V: Other provisions, if any,	
LE V: Other provisions, if any, REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member This document - record in accord	r or an authorized representative of a member dance with section 605.0203 (1) (b). Florida Statutes, I am aware the document to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE: Signature of a member This document accordant false information submitted in a	dance with section 605.0203 (1) (b). Florida Statutes, I am aware to document to the Department of State constitutes a third degree feloristic terms of the Department of State constitutes as third degree feloristic terms.
Signature of a member This document Assessment and State of a member any false information submitted in a as provided for in s.817.185. F.S.	dance with section 605.0203 (1) (b). Florida Statutes, I am aware to document to the Department of State constitutes a third degree fellowing the constitutes as the the constitutes a
Signature of a member This document Account on a sprovided for in s.817.155. F.S. LUIS ALEJANDRO TORRES P.	dance with section 605.0203 (1) (b). Florida Statutes. I am aware to document to the Department of State constitutes a third degree fel AYOT Typed or printed name of signee Filing Fees
Signature of a member This document - Accused in accordany false information submitted in a as provided for in s.817.155. F.S. LUIS ALEJANDRO TORRES P.	dance with section 605.0203 (1) (b). Florida Statutes. I am aware to document to the Department of State constitutes a third degree feloayout and appear of Signes Filing Fees Hes of Organization and Designation of Registered /
Signature of a member This document Assecuted in accordany false information submitted in a as provided for in s.817.155. F.S. LUIS ALEJANDRO TORRES P. \$125.00 Filing Fee for Artice	dance with section 605.0203 (1) (b). Florida Statutes. I am aware to document to the Department of State constitutes a third degree felloward of Typed or printed name of signed Filing Fees Hes of Organization and Designation of Registered A
REQUIRED SIGNATURE: Signature of a member This document and the end of a member of a memb	dance with section 605.0203 (1) (b). Florida Statutes. I am aware to document to the Department of State constitutes a third degree feld and the Department of State constitutes a third degree feld and Typed or printed name of signed Filing Fees. Here of Organization and Designation of Registered And Designation of Registered And Designation and De