L24000268327

(Re	equestor's Name)	
(Ac	ddress)	<u> </u>
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	1
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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ONVISION OF CORPORATIONS
ONVISION OF CORPORATIONS

W240000 35541

TSH 214/2 -



March 4, 2024

ANDRES BACALLAO 1516 W 41 ST HIALEAH, FL 33012 US

SUBJECT: ABS INSTALATIONS CORP

Ref. Number: W24000035541

We have received your document for ABS INSTALATIONS CORP and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(9) and/or 607.1622(10), Florida Statutes, the entity must be and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 124A00004678

Tabitha J Howell Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	New Filing Se Division of C					
CHDI	LECT. ABS INS	TALATIONS CORP				
SOBI	EC1;	(Name of Res	ulting	g Florida Limit	ed Com	pany)
						I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this	s matter to:		
ANDR	RES BACALLAO					
		(Contact Person)			•	
ABS I	NSTALATIONS (CORP				
		(Firm/Company)			•	
1516	W 41 ST					
		(Address)			•	
HIALE	AH, FL 33012					
	((City, State and Zip Code)			-	
STAR	TAXSERV@GM	AIL.COM				
E-r	nail Address: (to b	e used for future annual re	port r	notifications)	•	
For fi	irther information	on concerning this ma	iter,	please call:		
ANDF	RES BACALLAO		at	(⁷⁸⁶	316-8	007
	(Name of Conta	ct Person)		(Area Code)	(Dayt	time Telephone Number)
		or the following amou a bank located in the			rocess	ed by this office must be payable in US
(\$25 fc & \$12:	i0.00 Filing Fees or Conversion 5 for Articles anization)	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 Son Division of C P.O. Box 632 Tallahassee, I	ection orporations 7			New F Division The C	Address: Ciling Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, 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: ABS INSTALATIONS CORP
(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 - P2 0000 39803 (Enter state, or if a non-U.S. entity, the name of the country)
05/27/2020
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ABS INSTALATIONS 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.
ASSET TO THE PARTY OF THE PARTY

Signed this 22	day of JANUARY	20	
Signature of Auth	norized Representative of	Limited Liability Compar	<u>ıy:</u>
Signature of Author	orized Representative: RES BACALLAO	Title: MGR	_
			4 -! 6 (2)
Signature(s) on be	half of Other Business Ent	ity: [See below for require	a signature(s)]
Signature:	135		
Printed Name: AND	RES BACALLAO	Title: PRESIDENT	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	<u> </u>
Signature:		· · · · · · · · · · · · · · · · · · ·	
Printed Name:		Title:	
Signature:			
Printed Name:	<u> </u>	Title:	
If Florida Corpor			
	nan, Vice Chairman, Directo		
If Directors or Office	cers have not been selected,	an Incorporator must sign.	
If Florida General	l Partnership or Limited L	iability 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)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ABS INSTALATI	IONS CORP		
<u> </u>		bility Company, "L.L.C.," or "LLC.")	
ARTICLE II -	· Address:		
•		e principal office of the Limit	ed Liability Company is:
Principal Offic	ce Address:	Mailing Address:	
1516 W 41 ST.		1516 W 41 ST.	
HIALEAH, FL 33	3012	HIALEAH, FL 33012	
The Limited Liabili	- Registered Agent, Registe	ered Office, & Registered Agegistered Agent. You must designate a	
The Limited Liabili business entity with	- Registered Agent, Registe	ered Office, & Registered Agegistered Agent. You must designate a	n individual or another
The Limited Liabili business entity with	- Registered Agent, Registe ity Company cannot serve as its own R h an active Florida registration.)	ered Office, & Registered Agegistered Agent. You must designate a	n individual or another
The Limited Liabili business entity with	- Registered Agent, Registerity Company cannot serve as its own Refinancial active Florida registration.) The Florida street address of the ANDRES BACALLAO	ered Office, & Registered Agegistered Agent. You must designate a	n individual or another
The Limited Liabili business entity with	- Registered Agent, Registerity Company cannot serve as its own Refinancial active Florida registration.) The Florida street address of the ANDRES BACALLAO	ered Office, & Registered Agegistered Agent. You must designate as the registered agent are:	CABLE AND/OF COR
The Limited Liabili business entity with	- Registered Agent, Registerity Company cannot serve as its own R than active Florida registration.) the Florida street address of the ANDRES BACALLAO N 3512 SW 25 ST	ered Office, & Registered Agegistered Agent. You must designate as the registered agent are:	CABLE AND/OR VERANCHISING OF CORPOR VITALLAHASSEE, FU
The Limited Liabili business entity with	- Registered Agent, Registerity Company cannot serve as its own R than active Florida registration.) the Florida street address of the ANDRES BACALLAO N 3512 SW 25 ST	ered Office, & Registered Agegistered Agent. You must designate as the registered agent are:	CABLE AND/OR FRANCHISION OF CORPO

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

4	RT	$\Gamma \cap \Gamma$	F	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	ANDRES BASALIAS		
MGR	ANDRES BACALLAO 3512 SW 25 ST		
	MIAMI, FL 33133		—
	MIAWI, FL 33133		
			
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(Use attachment if necessary)		F 60 6	HAY
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DECLUDED SIGNATURE.		•	
REQUIRED SIGNATURE:			
	10%		
	//		
Signature of a member of	an authorized representative of a	memher	
This document is executed in accordance	e with section 605,0203 (1) (b), Florida Stat	utes. I am awa	re that
	* * * * * * * * * * * * * * * * * * * *		faloni
any false information submitted in a doct	iment to the Department of State constitutes	a third degree	; iciony
any false information submitted in a doct as provided for in s.817.155, F.S.	ument to the Department of State constitutes	a third degree	ciciony

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)