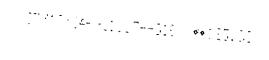
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

TO:	New Filing S Division of C							
SHR		HANDY SERVICES, LLC	3					
JUB.	<u> </u>		sulting Florida L	imited Co	empany)			
The e Busin	enclosed Article ness Entity" into	s of Conversion, Artic a "Florida Limited L	les of Organiz	ation, a any" in a	nd fees are submit accordance with s.	tted to con . 605.1045	vert an 5, F.S.	"Other
Pleas	e return all corr	espondence concernin	g this matter t	0:				
		ANA GARRIDO						
		(Contact Person)						
		(Firm/Company)						
	1469	SHOREWOOD DR					202	
		(Address)				ि जिल्ला	024 JUL 17 FH 4: 30	0 vt=
	AUBU	RNDALE, FL 33823				73 mj - 23	j===	ر • م ، •
	((City, State and Zip Code)	·			77 D.	~1	
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E-r	nail Address: (to b	e used for future annual re	port notifications	;)		· - ·		الرواية
For fi	ırther informati	on concerning this ma	tter, please cal	1:			Ö	
ANA (GARRIDO		at (²¹⁵	960-	4989			
	(Name of Conta	ect Person)		de) (Da	ytime Telephone Nun	nber)		
		or the following amou a bank located in the			sed by this office	must be p	ayable	in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fili and Certified C		S185.00 Filing F Certified Copy, and Certificate of Statu	d		
	Mailing Addr New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New Divis The (2415	et Address: Filing Section Sion of Corporation Centre of Tallahass N. Monroe Street, hassee, FL 32303	see)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OLIV	O HANDY SERVICES,	LLC				
(Must conta	in the words "Limited Liabil	ity Company, "L.L.C.," or "LLC."	<u>`</u>			
ARTICLE II - Address	:					
The mailing address and	street address of the p	orincipal office of the Lim	ited Liability Company			
Principal Office Address: 1469 SHOREWOOD DR		Mailing Address:				
		1469 SHOREWOOD DR				
AUBURNDALE, FL 33823		AUBURNDALE, FL 33823				
ARTICLE III - Registe The Limited Liability Company	cannot serve as its own Regi	AUBURNDALE, FL 338: d Office, & Registered A stered Agent. You must designate	Agent's Signature: an individual or another			
ARTICLE III - Registe The Limited Liability Company business entity with an active Fl	cannot serve as its own Regi orida registration.)	d Office, & Registered Astered Agent. You must designate	Agent's Signature: an individual or another			
ARTICLE III - Registe (The Limited Liability Company	cannot serve as its own Regi orida registration.) a street address of the	d Office, & Registered Astered Agent. You must designate	Agent's Signature: an individual or another			
ARTICLE III - Registe The Limited Liability Company business entity with an active Fl	cannot serve as its own Regi orida registration.) a street address of the	d Office, & Registered Astered Agent. You must designate registered agent are:	Agent's Signature: an individual or another			
ARTICLE III - Registe The Limited Liability Company business entity with an active Fl	cannot serve as its own Regiorida registration.) a street address of the ANA GARRI	d Office, & Registered Astered Agent. You must designate registered agent are: DO DE LA ROSA	Agent's Signature: an individual or another			
ARTICLE III - Registe The Limited Liability Company business entity with an active Fl The name and the Florida	cannot serve as its own Regiorida registration.) a street address of the ANA GARRI Nam 1469 SHOREN	d Office, & Registered Astered Agent. You must designate registered agent are: DO DE LA ROSA	Agent's Signature: an individual or another			
ARTICLE III - Registe The Limited Liability Company business entity with an active Fl The name and the Florida	cannot serve as its own Regiorida registration.) a street address of the ANA GARRI Nam 1469 SHOREN	d Office, & Registered Astered Agent. You must designate registered agent are: DO DE LA ROSA NOOD DR	Agent's Signature: an individual or another			

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)

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: OLIVO HANDY SERVICES, LLC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LLC	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, or	etc.
First organized, formed or incorporated under the laws of PHILADELPHIA, PENNSYLVANIA (Enter state, or if a non-U.S. entity, the name of the country)	
(Enter state, or if a non-U,S, entity, the name of the country)	
11/15/2017 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	n:
OLIVO HANDY SERVICES, 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 t	.0

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.



Kathleen McColgan Revenue Commissioner www.phila.gov/revenue

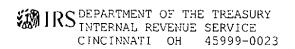
Certificate of Tax Clearance Permits/Licenses

Taxpayer
OLIVO HANDY SERVICES LLC

Issue Date July 10, 2024

Confirmation Number L0003839757

Tax Clearance Valid Through August 10, 2024



Date of this notice: 11-14-2017

Employer Identification Number:

82-3407537

Form: SS-4

Number of this notice: CP 575 B

OLIVO HANDY SERVICES EDWIN B OLIVO JIMENEZ GEN PTR 5801 TULIP ST PHILADELPHIA, PA 19135

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE...

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). Weccessigned you EIN 82-3407537. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065 03/15/2018

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.