# L24M)333884

(Re	questor's Name)	
DĀ)	dress)	
(Ad	dress)	
(Cit	y/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:	

Office Use Only



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07/25/24--01014--013 \*\*155.00



## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: REY POOLS & SP (Name of Resulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Articles of Organization Business Entity" into a "Florida Limited Liability Company	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:	
Nestor Martin Labeque (Contact Person)  Rey Pools & Spa (Firm/Company)  1990 Randall Blvd. (Address)	
City, State and Zip Code)  (City, State and Zip Code)  (City, State and Zip Code)  E-mail Address: (to be used for future annual report notifications)	
E-mail Address: (to be used for future annual report notifications)  For further information concerning this matter, please call:	
Nestor M. Labeque at (239	) 826-2499 (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks pridollars and drawn on a bank located in the United States)	rocessed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	
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

### **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:    Pools & Spa   P2400045155
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of Floci do (Enter state, or if a non-U.S. entity, the name of the country)
on Joly 3 <sup>rd</sup> , 2024 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
REY POOLS 2 SPA, LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 104 25 + 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.

•	
Signed this 220d day of 1014	_20_24
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Nestoc H. Labeque	+1
Signature of Authorized Representative:	Tit Peaci lead
Printed Name: NPSTOX 17. COLORGIST	_ Title: <u>Presidexi7</u>
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)
Signature: NESTOC M. Labeque	m: 1 Oca c: \ \
Printed Name: NESTOC M. Labegue	_ Title: President
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	ent a
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature	
Signature:Printed Name:	Title:
Timed Name.	
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
	•
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnershin:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	

\$25.00 Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: \$125.00

\$30.00 (Optional) \$5.00 (Optional)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

(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:	Mailing Address:
1990 Randall Blud	1990 Bandall Blud.
Naples, FL 34120	Naples, Fl. 34120

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:

Nestor M. Lobeque

Name

1990 Rondoll Blud.

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

Nocles FL 34120

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)

#### **ARTICLE IV-**

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

	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
Pre Si 100+	Nestor M. Labeaux
	1990 Prandell RIVA.
	Naples, FL 34120
NO	Carlos A. De Sousa Lore
	16621 Lareshore 10 #923
	FORT HYPES, FL 33912
$\subseteq$	Raynel (ardoso Tonet
	849 SW YOUN TEC.
	Cape (exa) TL 33991
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Use attachment if necessary)	
Ose attachment if necessary)	2007
	0
LE V: Other provisions, if any.	
DEQUIDED SIGNATURE.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
- Hart	
Signature of a member or a	an authorized representative of a member with section 605 0203 (1) (b) Florida Statutes I am aware the
Signature of a member or a This document is executed in accordance	with section 605,0203 (1) (b). Florida Statutes, I am aware the
Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S.	with section 605.0203 (1) (b). Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felo
Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware the ment to the Department of State constitutes a third degree feloped or printed name of signee  Filing Fees

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)