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## **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corporation	ons	
SUBJECT: Otniel Domingue:		
SUBJECT.	(Name of Resulting Florida Lin	ited Company)
		tion, and fees are submitted to convert an "Othery" in accordance with s. 605.1045, F.S.
Please return all corresponder	nce concerning this matter to	
Otniel Dominguez		
(Contac	ct Person)	_
Otniel Dominguez, LLC		
(Firm/C	Company)	_
8851 NW 119 Street, # 1102	,	
	idress)	_
Hialeah Gardens, FL 33018	,	
(City, State	and Zip Code)	_
Otniel971@gmail.com	•	
E-mail Address: (to be used for	future annual report notifications)	_
For further information conce	erning this matter, please call	
Otniel Dominguez	at ( <sup>786</sup>	229-1050
(Name of Contact Person)	) (Area Cod	(Daytime Telephone Number)
Enclosed is a check for the fo dollars and drawn on a bank i		processed by this office must be payable in US
	00 Filing Fees S180.00 Filing and Certified Co	<u> </u>
Mailing Address: New Filing Section Division of Corporation 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:  Dominguez Realty, Inc.
(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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
10/01/2024
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:
Otniel Dominguez, 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 15th day of October	_ 20 <u> <b>2</b> 4</u>
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: X Printed Name: Otniel Dominguez	Title:-Manager
Signature(s) on behalf of Other Business Entity: [	
Signature: X	
Printed Name: Otniel Dominguez	Title: President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signatura	
Signature:Printed Name:	
Signature	
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 Partnershin:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Otniel Dominguez, LLC (Must contain the words "Li	mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street addres	s of the principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
Principal Office Address: 8851 NW 119 Street	Mailing Address: 8851 NW 119 Street

Otniel Dominguez

Na	me
8851 NW 119 Street, # 110	2
Florida street address (P	.O. Box NOT acceptable)
Hialeah Gardens	FL 33018
City 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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	
MGR — Manager MGR	Otniel Dominguez
	8851 NW 119 Street, # 1102
	Hialeah Gardens, FL 33018
<del></del>	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
·	
REQUIRED SIGNATURE:	
X	

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.

Otniel Dominguez

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)