124111)496744

(Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200440220592

10/29/24--01011--002 **128.75



COVER LETTER

TO: New Filing Section Division of Corporations						
SUBJECT: Domesticating a New	Jersey LLC to Flo	orida				
SOBJECT.	Name of Resulting F	Florida Limited Co	ompany)	-		
The enclosed Articles of Converse Business Entity" into a "Florida"		-			"Other	
Please return all correspondence	concerning this	matter to:				
SACHA TORRES						
(Contact Pe	erson)					
SSJ BUSINESS SOLUTIONS						
(Firm/Com	pany)			*15	2	
2126 TREASURE HILL ST				₩.C.	024	
(Addre:	58)			[m	ene ene
MINNEOLA, FL, 34715					င္မ	
(City, State and	Zip Code)					
SACHA.FACUL@GMAIL.COM				m s	2: 1	
E-mail Address: (to be used for futu	ire annual report not	tifications)		۲- <u>۲</u>	- 0	
For further information concerni	ng this matter, pl	ease call:			_	
SACHA TORRES	at (<u>_</u>	107 501	1-1181			
(Name of Contact Person)	a. (_	(Area Code) (D	aytime Telephone Number)	_		
Enclosed is a check for the followed dollars and drawn on a bank location.	•	•	ssed by this office must b	oe payable	in US	
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	-	80.00 Filing Fees Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New Divi The	et Address: Filing Section ision of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite	e 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: VM&A TRANSLATIONS 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
07/01/2022 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: VM&A TRANSLATIONS 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 11 day of NOVEMBER	20
Signature of Authorized Representative of Limi	ited Liability Company:
(\cdot , ρ_{\bullet})	eusigned by: LOGS VIGOV
Signature of Authorized Representative.	4cc2F4(R46GAMBR
Printed Name: RENATA VERONESE	**COFTIE: MINBR
or a contract to the contract of	16
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Chuotasylaa	
Printed Name: RENATA VERONESE:	Title: AMBR
Signature: Assinado por: Printed Name: GUSTAVO MERONESE	
Printed Name GUSTAVOMEROMESE	Title: AMBR
Timed Name: 000 ii v 000 and 100 and 1	Title. Tondy.
Signature:	
Printed Name:	Title
Timed (turne)	
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
TRUST COLOR CONTROL TRUST COLOR COLOR CONTROL TO CONTRO	an Educad Domaninolius
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
A.D. nahaman	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
	\$30.00 (Optional)
Certified Copy:	\$5.00 (Optional)
Certificate of Status:	\$5.00 (Optional)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N The name of the	Name: : Limited Liability Comp	pany is:	
VM&A TRANSLA		d Liability Company, "L.L.C.," or "LLC.")	
	(Must contain the words "Limite	a Liability Company, "L.L.C., or "L.D.C.)	
ARTICLE II - The mailing add		f the principal office of the Limit	ed Liability Company is:
Principal Offic	e Address:	Mailing Address:	
13250 OULTON	CIRCLE	13250 OULTON CIRCLE	
ORLANDO, FL.	32832	ORLANDO, FL, 32832	
(The Limited Liabilit business entity with	y Company cannot serve as its o an active Florida registration.)	gistered Office, & Registered Ag wn Registered Agent. You must designate ar of the registered agent are:	
The name and ti		of the registered agent are:	
	SACHA TORRES	Name	
		Name	
	2126 TREASURE HIL Florida street addre	L ST ss (P.O. Box <u>NOT</u> acceptable)	
	MINNEOLA	FL_34715	
	City	Zip	
liability co registered age statutes rela	mpany at the place designent and agree to act in this ting to the proper and cost obligations of my positions.	nt and to accept service of process nated in this certificate, I hereby as capacity. I further agree to compuplete performance of my duties, and as registered agent as provided procusing to the TORKES SICH TORKES T'S Signature (REQUIRED)	ecept the appointment as oly with the provisions of all and I am familiar with and
	Registered Agen	(\$ Signature (REQUINED)	
	(CC	ONTINUED)	POUDEC -3 PH 2:10 SECULTARIASSIES FATE

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	RENATA VERONESE
	13250 OULTON CIRCLE
	ORLANDO, FL, 32832
AMBR	GUSTAVO VERONESE
	13250 OULTON CIRCLE
	ORLANDO, FL, 32832
	
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	1000 1701
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	one.
(Use attachment if necessary)	
	PH 2: 1
FICLE V: Other provisions, if any.	ਸ਼ਿੰਹ
REQUIRED SIGNATURE:	
DocuSigned by:	
r kenotatylan	
8944C62EA:DA46C	
Signature of a member or	an authorized representative of a member
	e with section 605.0203 (1) (b). Florida Statutes. I am aware that
any false information submitted in a doct	ument to the Department of State constitutes a third degree felony
as provided for in s.817.155, F.S.	,
RENATA VERONESE	

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)