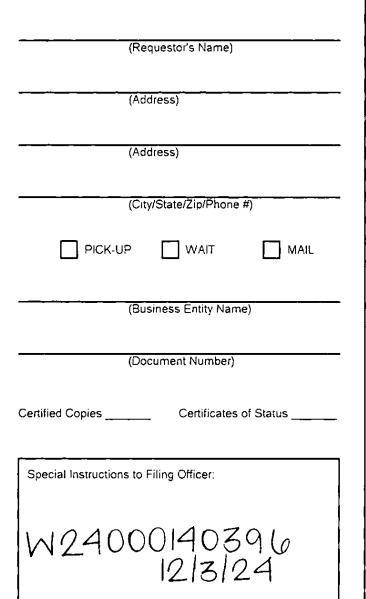
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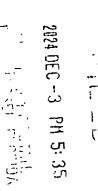


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RECEIVED

SERVEN SATE TALLAHAUSEEFFL

FLORIDA DEPARTMENT OF STATES ANII: 55 Division of Corporations

October 14, 2024

LUIS GARCIA 2000 PONCE DE LEON BLVD STE 500 CORAL GABLES, FL 33134 US

SUBJECT: CENTER HALF LLC Ref. Number: W24000140396

We have received your document for CENTER HALF LLC 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The printed name and signature of the authorized reprensentative must be placed on the designated lines on the last page.

Lastly, the registered agent designated must be an active Florida entity. Please note that the name of the registered agent must be provided as it is displayed in our records. All punctuations & letters must be included

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.

Monique K Anderson Regulatory Specialist II

Letter Number: 024A00022655

2024 DEC -- 3 PH 5: 35

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 f Center Half Corp	iling of the Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general	l partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of the State of (Enter state, or if a	of Florida a non-U.S. entity, the name of the country)
on 05/17/2023 (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set forth in the set of the florida Limited Liability Company as set of the set of	the attached Articles of Organization:
Center Half 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 redocument's effective date on the Department of State's records.	.)
5. The plan of conversion has been approved in accordance with all ap	plicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members which such members are entitled under ss. 605.1006 and 605.1061-605	

Signed this 27 day of September	<u>2</u> 024	·		
Signature of Authorized Representative of Limi	ited Liabil	lity Company:		
Signature of Authorized Representative: Lagran Printed Name: Ignacio Lopez	uo da	Bosse		
Printed Name: Ignacio Lopez	Title	Manager		
Signature(s) on behalf of Other Business Entity:	See below	for required sign:	ature(s)]	
Signatura: Simplify Anoun				
Signature: Jynuio Nopea. Printed Name: Agnacio Lopez	Title:	Director		
Signature:				
Signature:Printed Name:	Title:			
Signature:				
Printed Name:	Title:			
Signature:Printed Name:	<u></u>			
Printed Name:	title:			
Signature:Printed Name:	Title			
rinited Name	rice			
Signature:Printed Name:	Title			
rrinted Name:	mie:			
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 Signature of one General Partner.	<u>ity Partner</u>	ship:		
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ity Limited	Partnership:	_	
All others:				2021 DEC
Signature of an authorized person.				930
Fees:			.'-	. 4
Articles of Conversion:	\$25.00		<u> </u>	
Fees for Florida Articles of Organization:	\$125.00			ر الله الله الله الله الله الله الله الل
Certified Copy: Certificate of Status:	\$30.00 (9 \$5.00 (O	Optional) Optional)	9/	PH 5: 35

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabili	ty Company i	s:		
Center H	alf LLC			
(Must contain the wor		lity Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of the	principal of	fice of the Limites	d Liability Company is:
Principal Office Address:		Mailing	g Address:	
237 S Dixie Highway 4th floor		C/O A	SG Corp	
Coral Gables, FL, US. 33133			Dixie Highway 4th	<u> </u>
		Coral	Gables, FL, US. 33	133
The name and the Florida street Advisory Se		_	_	
2000 Ponce	de Leon Blyd	l, Ste 600		
Florida stre	et address (P.	O. Box <u>NO</u>	T acceptable)	
Coral Ga	ables	FL	33134	
	City		Zip	
Having been named as registe liability company at the plat registered agent and agree to a statutes relating to the proper accept the obligations of m Registered	ce designated act in this capar and complete y position as reacted Agent's Si	in this certifacity. I further performant egistered at grant grant grant (RI	ficate, I hereby acc her agree to compl nce of my duties, ar gent as provided fo	cept the appointment as y with the provisions of all ad I am <u>fa</u> miliar with and
	(CONTI	NUED)		. .

ARTICLE 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 MGR	Ignacio Lopez Av. Libertador Lavalleja; 1881; #702 Montevideo, UR; 11800		
(Use attachment if necessary)			
ICLE V: Other provisions, if any.	×;- ′		
REQUIRED SIGNATURE:			
dyr	racio dopoer		
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony		
CV CV	gnacio Lopez ped or printed name of signee		
Ty			
	Filing Fore		

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)