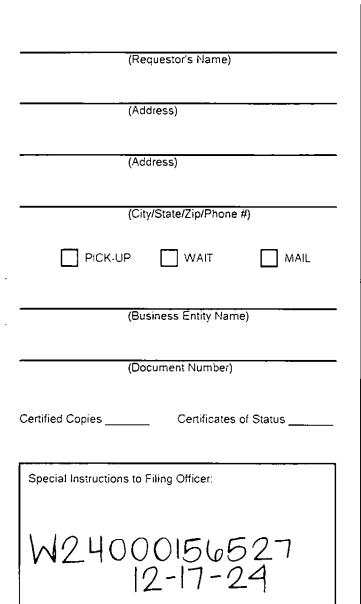
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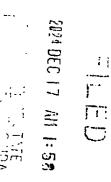


Office Use Only



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November 22, 2024

HERNAN ALMIRON 4842 NW 107 PLACE DORAL, FL 33178 US

SUBJECT: EASY SERVICE LLC Ref. Number: W24000156527

2024 DEC 17 AH 1: 58

ŢŦ,

We have received your document for EASY SERVICE 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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: 724A00025642

2024 DEC 17 PM 2: 08

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 Articl EASY SERVICE LLC | les of Conversion is: |
|---|---|
| (Enter Name of Other Business Entity) | <u>.</u> • |
| 2. The "Other Business Entity" is a | |
| (Enter entity type. Example: corporation, limited partnership, general partnership, commo | on law or business trust, etc.) |
| First organized, formed or incorporated under the laws of | name of the country) |
| 05/08/2024 | |
| (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Arti | icles of Organization: |
| DREK GROUP 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 9 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 dat 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 apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. | sal rights the affidunt to DEC 17 All 1:5 |

| Signed this 12 day of DECEMBER | 20_24 | | | |
|---|--|--------|----------|-----|
| Signature of Authorized Representative of Limit |) | | | |
| Signature of Authorized Representative: | | • | | |
| Signature(s) on behalf of Other Business Entity: | See below for required signature(s) | | | |
| Signature: Printed Name: HERNAN ALMIRON | Title: MANAGER | - | | |
| Signature:Printed Name: | Title | - | | |
| | | | | |
| Signature: Printed Name: | Title: | - | | |
| Signature:Printed Name: | Title: | - - | | |
| Signature: | | - | | |
| Printed Name: | | | | |
| Signature:Printed Name: | Title: | - | | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc. | | | | |
| If Florida General Partnership or Limited Liabili Signature of one General Partner. | ty Partnership: | | | |
| If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners. | ty Limited Partnership: | | | |
| All others: Signature of an authorized person. | | | 2024 DEC | į |
| Fees: | | 71-5 | 17 | 1 |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) | | All 1:58 | ! T |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Cor | mpany is: | |
|---|---|---|
| DREK GROUP LLC | | |
| (Must contain the words "Lin | nited Liability Company, "L.L C.," or "LLC.") | |
| ARTICLE II - Address: The mailing address and street address | s of the principal office of the Limited | Liability Company is: |
| Principal Office Address: | Mailing Address: | |
| 2721 OCEAN CLUB BLVD UNIT 303 | 2721 OCEAN CLUB BLVD (| UNIT 303 |
| HOLLYWOOD, FL 33019.US | HOLLYWOOD, FL 33019, U | JS |
| | | |
| ARTICLE III - Registered Agent, F (The Limited Liability Company cannot serve as it business entity with an active Florida registration The name and the Florida street addre HERNAN ALMIROR | ess of the registered agent are: | ndividual or another 2824 DEC 17 |
| 2721 OCEAN CLUI | B BLVD UNIT 303 | A III |
| Florida street add | dress (P.O. Box <u>NOT</u> acceptable) | 1 = (|
| HOLLYWOOD | FL 33019 | ි හි ද |
| Cit | ty Zip | |
| liability company at the place des registered agent and agree to act in statutes relating to the proper and accept the obligations of my pos | gent and to accept service of process for signated in this certificate, I hereby accept this capacity. I further agree to comply complete performance of my duties, and ition as pegistered agent as provided for gent's Signature (REQUIRED) | cept the appointment as wwith the provisions of all ad I am familiar with and |

(CONTINUED)

ARTICLE IV-

HERNAN ALMIRON

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

| HERNAN ALMIRON 2721 OCEAN CLUB BLVD UNIT 303 | | |
|---|--|--|
| | | |
| | | |
| 2721 OCEAN CLUB BLVD UNIT 303 | | |
| HOLLYWOOD, FL 33019 | | |
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| authorized representative of a member | | |
| th section 605.0203 (1) (b), Florida Statutes, I am aware th | | |
| nt to the Department of State constitutes a third degree felo | | |
| ţ | | |

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)