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(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
W25000052719 FC 4-17-25





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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Trade Capital LLC
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Pedro Genez (Contact Person)
((,
Trate Capital LLC (Firm/Company)
GIZI SW Gth St
10.
(City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
PECYO Comes at (786) 619-4151 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$150.00 Filing Fees and Certificate of Status \$180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of <u>FOCUL</u> (Enter state, or if a non-U.S. entity, the name of the country)
on 03/22/2024 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Trade Capital LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: c3/31) 2025. (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 28 day of March	20 25.
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Padro Consa	Title: Munuger Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: Proposition 60 must be a second of the second	Title: <u>President Pirector</u>
Signature:Printed Name:	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL 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

ARTICLE I - Nam The name of the Lir	ie: nited Liability Company :	is:		
Tra	Le Capital Li t contain the words "Limited Liab	_LC		_
(Mus	t contain the words "Limited Liab	ility Company, "L.L.C.," or	"LLC.")	
ARTICLE II - Add The mailing address	iress: and street address of the	principal office of th	e Limited Liability (Company is:
Principal Office A	ddress:	Mailing Addres	is:	
8355 W FL	32/144 Ste 2)7 9121 Su Minm) ist st PL 33174	- - -
(The Limited Liability Cor	gistered Agent, Register npany cannot serve as its own Reg tive Florida registration.)	ed Office, & Registe gistered Agent. You must de	ered Agent's Signat esignate an individual or an	ture: other
The name and the F	lorida street address of the	e registered agent are	•	
	EASY TAXES A	No Consultin	g Services	
	Nai	me		·.
	1695 NW 110 +1	AVE Suite	213	FI 12: 46
	Florida street address (P.	O. Box NOT accepts	able)	- £
	Micim	FL 331	72 ' ' ' ' ' '	6
	M carm City	FL 33 I		
liability compa registered agent a statutes relating	ed as registered agent and any at the place designated and agree to act in this cap to the proper and complet gations of my position as Registered Agent s.S.	in this certificate, I hacity. I further agree e performance of my registered agent as progenities and the control of the cont	ereby accept the appo to comply with the pi duties, and I am fami vovided for in Chapter	ointment as rovisions of al liar with and
	(CONT)	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	Pollo Carro	
MBZ	red o come	
	4171 812 GAR ST 0	
	Miami, FL 33174	
·····		
 		
		
		•
(Use attachment if necessary)		
(Use attachment if necessary)		
		-
LE V: Other provisions, if any.	· ·	
LE V: Other provisions, if any.	Δ0	
(Use attachment if necessary) LE V: Other provisions, if any. REQUIRED SIGNATURE:	Ame	
LE V: Other provisions, if any.	Ane	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	an authorized representative of a member	· -
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am a	ware
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document is a document in a doc	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. 1 am a nent to the Department of State constitutes a third deg	ware
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, I am a	ware
REQUIRED SIGNATURE: Signature of a member or: This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am a nent to the Department of State constitutes a third deg	ware
REQUIRED SIGNATURE: Signature of a member or: This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am a nent to the Department of State constitutes a third deg	ware
REQUIRED SIGNATURE: Signature of a member or: This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes, I am a	war