# P09000035388

(Requestor's Name)
·
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodinett (tallibot)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE

J. BRYAN

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EXAMINER

1-2014 13410

#### **COVER LETTER**

Division of O	Section Corporations			
SUBJECT: Migue	el Armenteros, P.A (Name of Resulti)	A. ng Florida Profit Corporati		
	icate of Conversion, A	rticles of Incorporation	n, and fees are submitted to ation" in accordance with s.	
Please return all cor	respondence concernin	g this matter to:		
Miguel Armenteros	(Contact Person)			
	(Firm/Company)		SECH FALL	gel
690 S.W. 1 Court; Un	it #1432 (Address)		OS APR 20 FIT SECRETARY OF STATE	0
Miami, FL 33130	(City, State and Zip Code)		OF STATE	l.: 25
For further informat	tion concerning this ma	itter, please call:		
Miguel Armenteros (Name of Co	ontact Person)	_ \	3-0467 aytime Telephone Number)	
Enclosed is a check	for the following amou	ınt:		
\$105.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing Fees and Certified Copy	☐ \$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS:		MAILING.	ADDRESS:	
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		Registration Division of O P. O. Box 63 Tallahassee,	Corporations 927	

Tallahassee, FL 32301

### **Certificate of Conversion**

For

# "Other Business Entity"

## Florida Profit Corporation

"Other Business Entity"							
Florida Profit Corporation							
This Certificate of Conversion and attached Articles of Incorporation are submitted its accordance with s. 607.1115, Florida Statutes.  1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate.							
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:							
Miguel Armenteros, P.L. #L06000028105							
(Enter Name of Other Business Entity)							
2. The "Other Business Entity" is a limited liability company (Enter entity type. Example: limited liability company, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)							
first organized, formed or incorporated under the laws of Florida  (Enter state, or if a non-U.S. entity, the name of the country)							
on March 16, 2006 off. 03/15/2006  (Enter date "Other Business Entity" was first organized, formed or incorporated)							
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:							
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>							
Miguel Armenteros, P.A.							
(Enter Name of Florida Profit Corporation)							
5. If not effective on the date of filing, enter the effective date:							
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as the							

effective date listed in the attached Articles of Incorporation, if an effective date is listed

therein.)

Signed this 16 day	of April	, 20_09	
Required Signature for I	lorida Profit Corporati	on:	
Signature of Chairman, Vibeen selected, an Incorpor		Officer, or, if Directors or Officers ha	ive not
		President 30	- 19 - 18 - 18
Required Signature(\$) (ou signature(s).]	behalf of Other Business	Entity: [See below for required	PR 20
Signature:			-175. -134.
Printed Name: Miguel Arme	nteros	Title: Managing Member	-93
Signature:			_ Sec.
Printed Name:		_ Title:	<del></del>
Signature:			_
Printed Name:		Title:	<del></del>
Signature:			<u> </u>
Printed Name:		Title:	_
Signature:			<del></del>
Printed Name:		_ Title:	_
Signature:			
Printed Name:		Title:	<del></del>
If Florida General Partne Signature of one General Partne	_	y Partnership:	
If Florida Limited Partne Signatures of ALL General		y Limited Partnership:	
If Florida Limited Liabili Signature of a Member or A	<del></del>		
All others: Signature of an authorized	person.		
Fees:  Certificate of Conv Fees for Florida A Certified Copy: Certificate of State	rticles of Incorporation:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

#### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

Miguel Armenteros, P.A.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 690 S.W. 1 Court #1432
Miami, FL 33130

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide legal services



#### ARTICLE IV SHARES

The number of shares of stock is: 100

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Miguel Armenteros President 690 S.W. 1 Court #1432 Miami, FL 33130

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Miguel Armenteros 690 S.W. 1 Court. #1432 Miami, FL 33130

#### **INCORPORATOR** ARTICLE VII

The <u>name and address</u> of the Incorporator is:

Miguel Armenteros 690 S.W. 1 Court. #1432 Miami, FL 33130

Having beginning as registered agent to accept service of process for the above stated corporation at the place certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

April 16, 2009 gnature/Registered Agent Date

Signature/Incorporator

April 16, 2009

Date