

P/S 000053806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900273841649

06/10/15--01023--005 \*\*113.75

05/22/15--01029--011 \*\*43.75

FILED  
15 JUN 23 PM 12:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

115-40739

Tampa, 05/19/2015

**PARADISE ARENAS BLANCAS, LLC**

7345 Jackson Springs Rd., Suite D.

Tampa, FL. 33634

**Document Number: L11000017340**

**TO: Florida Division of Corporations.**

**New Filing Section.**

This letter is to inform you that by mistake, on 05/13/2015, we filed a new profit corporation on line (see receipt attached, confirmation number 900272892729 for \$70) instead of filed a certificate of conversion for a LLC into a Florida Profit Corporation for the corporation mentioned above.


Florida Division of Corporations received our online transmitted document; however, the document has not been filed yet. See copy of email attached, document # W15000033919.

Now, we are filing by paper a certificate of conversion and we want that fee already paid (\$70) will be applied to the new filing fees which are \$ 113.75. You can find the balance for \$43.75 in a money order.

We apologize for the inconvenience and hope you can solve this matter.

Thanks in advance...

Sincerely

  
**Lisette Alvarez (President)**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 11, 2015

LISETTE ALVAREZ  
7345 JACKSON SPRINGS ROAD, SUITE D  
TAMPA, FL 33634

SUBJECT: PARADISE ARENAS BLANCAS, LLC  
Ref. Number: W15000040739

We have received your document for PARADISE ARENAS BLANCAS, LLC and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 815A00012260

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** PARADISE ARENAS BLANCAS, INC  
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

LISETTE ALVAREZ

Contact Person

PARADISE ARENAS BLANCAS, INC

Firm/Company

7345 JACKSON SPRINGS RD, SUITE D

Address

TAMPA, FL. 33634

City, State and Zip Code

paradisearenasblancas@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LISETTE ALVAREZ at ( 813 ) 298-7798  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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:**

New Filings Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filings Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Profit Corporation**

FILED  
15 JUN 23 AM 7:50

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes. ~~SECRET~~

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:  
PARADISE ARENAS BLANCAS, LLC.

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,  
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 02/09/2011  
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:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

PARADISE ARENAS BLANCAS, INC

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 05/19/2015

(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; **AND 2)** must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

**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.

Signed this 19 TH day of MAY, 20 15.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

Printed Name: LISETTE ALVAREZ Title: PRESIDENT

**Required Signature(s) on behalf of Other Business Entity:** [See below for required signature(s).]

Signature: \_\_\_\_\_

Printed Name: LISETTE ALVAREZ Title: MANAGER MEMBER

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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

FILED

15 JUN 23 AM 7:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be: PARADISE ARENAS BLANCAS, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

Principal street address  
7345 JACKSON SPRINGS RD, SUITE D  
TAMPA, FL 33634

Mailing address, if different is:  
7345 JACKSON SPRINGS RD, SUITE D  
TAMPA, FL 33634

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: LISETTE ALVAREZ (PRESIDENT)  
Address: 7345 JACKSON SPRINGS RD, SUITE D  
TAMPA, FL 33634

Name and Title: HECTOR ECHEVARRIA (VP-SECRET))  
Address: 7345 JACKSON SPRINGS RD, SUITE D  
TAMPA, FL 33634

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: LISETTE ALVAREZ  
Address: 7345 JACKSON SPRINGS RD, SUITE D  
TAMPA, FL 33634

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: LISETTE ALVAREZ  
Address: 7345 JACKSON SPRINGS RD, SUITE D  
TAMPA, FL 33634

\*\*\*\*\*

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

  
Required Signature/Registered Agent

05/19/2015  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

05/19/2015  
Date