

PI6000079399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

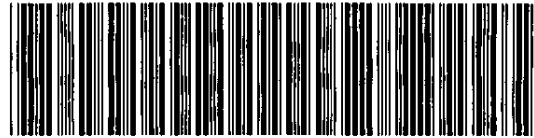
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/27/16--01012--016 **105.00

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2016 SEP 27 AM 9:10
CLERK OF STATE
TALLAHASSEE, FLORIDA

V HERRING

SEP 29 2016

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: DL & MF INVESTMENTS CORP

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:

Alvaro Castillo

Contact Person

Castillo & Associates

Firm/Company

1390 Brickell Avenue Suite 200

Address

Miami, FL 33131

City, State and Zip Code

alvaro@alvarocastillopa.com

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

For further information concerning this matter, please call:

Alvaro Castillo

at (305) 371-5540

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$105.00 Filing Fees	<input type="checkbox"/> \$113.75 Filing Fees and Certificate of Status	<input type="checkbox"/> \$113.75 Filing Fees and Certified Copy	<input type="checkbox"/> \$122.50 Filing Fees, Certified Copy, and Certificate of Status
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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

2018 SEP 27 AM 9:10

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.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

DL & MF INVESTMENTS, LLC

L15-182469

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 10/27/2015

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 attached Articles of Incorporation:

DL & MF INVESTMENTS CORP

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; **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.

Required Signature for Florida Profit Corporation:

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

Printed Name: DIRK REINICKE Title: Director

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

Signature: [Signature]

Printed Name: DIRK REINICKE Title: Manager

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)

STATE OF FLORIDA
TALLAHASSEE

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

ARTICLE I NAME

The name of the corporation shall be: DL & MF INVESTMENTS CORP

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal street address

1390 Brickell Avenue Suite 200

Mailing address, if different is:

1390 Brickell Avenue Suite 200

Miami, FL 33131

Miami, FL 33131

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation may engage in any activity or business permitted under the laws of the United States

and under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: One Thousand (1,000)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DIRK REINICKE (Director)

Name and Title: _____

Address: 1390 Brickell Avenue Suite 200

Address: _____

Miami, FL 33131

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

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Name: Alvaro Castillo
Address: 1390 Brickell Avenue Suite 200
Miami, FL 33131

2016 SEP 27 AM 9:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DIRK REINICKE
Address: 1390 Brickell Avenue Suite 200
Miami, FL 33131

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

9.26.16

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

9.26.16

Date