P18000 71442

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	. #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

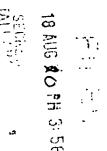
Office Use Only

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COVER LETTER

TO:	Charter Section Division of Co							
SHRI	ECT:	estorations						
11000	ECT	Name of	Resulting F	lorida Profit	Corporation	_		
		e of Conversion, Article Profit Corporation" in ac				vert an ''	Other I	Business
Please	ereturn all corresp	pondence concerning thi	s matter to:					
Cesa	r G. Агасела							
		Contact Person						
Arace	na Restorations,	LLC						
		Firm/Company	•					
110 S	SW 97 Terr					5.c	4	
	·	Address					ID AUG	1 ,
Pemb	oroke Pines, FL 33	3025				1.12	67.3	. .
		City, State and Zip Cod	e				<u> </u>	•
	na.restorations@	-				tt	<i>د</i> ب د	:
	E-mail address: (t	to be used for future ann	ual report n	otification)			اب	
For fi	irther information	concerning this matter.	please call:					
Cesai	r G. Aracena		786 at (306-2	2984			
	Name of Co	ontact Person	Α	rea Code and	l Daytime Telephone Ni	umber		
Enclo	sed is a check for	the following amount:						
■ \$10	05.00 Filing Fees	☐\$113.75 Filing Fees and Certificate of Status	☐\$113.75 and Certif	Filing Fees led Copy	☐\$122.50 Filing Fees Certified Copy, and Certificate of Status			
New I Divisi Clifto	EET ADDRESS: Filings Section ion of Corporation in Building	ns		New F Divisio P. O. I	ING ADDRESS: Filings Section on of Corporations Box 6327			

Tallahassee, FL 32301

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

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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	f Conversi	ion is:	
Aracena Restorations, LLC 17 COO 1996	3 5		
Enter Name of Other Business Entity	<u></u> .		
2. The "Other Business Entity" is a Limited Liability Company			
(Enter entity type. Example: limited liability company, limited partners general partnership, common law or business trust, etc.)	hip,	13 aUS	
first organized, formed or incorporated under the laws of	11	<u></u>	₹ !
(Enter state, or if a non-U.S. entity, the name of the country)		20	
09/20/2017 on	•	- 10	! .u
Enter date "Other Business Entity" was first organized, formed or incorpo 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the organized, formed or incorporated:		ىي ص Vhich it i	s now
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorpor	ation:		
Aracena Restorations, Inc.			
Enter Name of Florida Profit Corporation	<u></u> ·		
5. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to nor more than 90 days after the date this documents)	ıt is filed	by the F	lorida
Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirement	rs this dat	e will no	nt be
listed as the document's effective date on the Department of State's records	,		

Page 1 of 2

•			
Signed this 12 day of August			
Required Signature for Florida Profit Corporation	<u>i</u>		
Signature of Chairman, Vice Chairman, Director, Offi Incorporator: Printed Name: (250x /G. AIZACENHTitle: Pre	cer. or, if Directors or Officers have not bee	m selected,	, an
Required Signature Signature: Whether Business		s).]	
Printed Name: Cesar G. Aracena	PresidentTitle:	-	
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 Signature of one General Partner.	y Partnership:		
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	v Limited Partnership:		
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.			
All others: Signature of an authorized person.		ALL/4	18 AUG 20
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	, r	ን

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

The name of the corporation shall be: Aracena Restoration	ons, Inc.		
ARTICLE II PRINCIPAL OFFICE			
The principal place of business/mailing address is:			
Principal street address 110 SW 97 Terr	Mailing address, if dit	ferent is:	
Pembroke Pine, FL 33025			
ARTICLE III PURPOSE			
The purpose for which the corporation is organized is:			
All legal and lawful business			
			
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		<u></u>	18 JUG
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ARTICLE IV SHARES 100			ات ع
The number of shares of stock is:			
ARTICLE V INITIAL OFFICERS AND/OR D	IRECTORS		
Cesar G. Aracena, President Name and Title:			
	Name and Title:		
Address: 110 SW 97 Terr	Address:		
Pembroke Pines, FL 33025			
· · · · · · · · · · · · · · · · · · ·	_		
Name and Title:	Name and Title:		
Address:	Address:		
ame and Title:	Name and Title:		
ddress:	Address:		

	E VI REGISTERED AGENT		
The <u>name</u>	e and Florida street address (P.O. Box NOT accepta	ible) of the registered agent is:	
Name:	Cesar G. Aracena		
Address:	110 SW 97 Terr		
	Pembroke Pines, FL 33025		
<u>ARTICL</u>	E VII INCORPORATOR		
The name	and address of the Incorporator is:		
Name:	Cesar G. Aracena		
Address:	110 SW 97 Terr		
	Pembroke Pines, FL 33025		
******	*************	*****	
		rocess for the above stated corporation at the place design t as registered agent and agree to act in this capacity	ated in
1		and agree to act in this capacity	
≤ 4	the tule	8/9/2018	
	Required Signature/Registered Agent	Date	
I subnya (his document and affirm that the facts stated herein	are true. I am aware that any false information submitt	ed in a
	to the Department of State constitutes a third degre		
A		8/9/2018	
	Hamila Cimenton (Inc.		
	Required Signature/Incorporator	Date	