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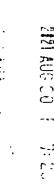
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
· , , ,
(Document Number)
,-
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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08/03/21--01044--011 **105.00



W21-11262



August 13, 2021

JOSE M VEGA SUAREZ VEGA & ASSOCIATES INC. 25 SE 2 AVE 410 MIAMI, FL 33131

SUBJECT: NOELMA INVESTMENTS CORP

Ref. Number: W21000112072

We have received your document for NOELMA INVESTMENTS CORP and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the marked section in the Articles of Conversion. A signature is missing.

Please return 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.

Letter Number: 521A00019331

DANIEL L O'KEEFE Regulatory Specialist II

10:5 E3 E3 2:00

COVER LETTER

TO: New Filing Se Division of Co				
	Noelma Inve	stments	Cor	-p
SOBJECT		Resulting Flori		<u> </u>
	of Conversion, Articles of rofit Corporation" in acc	-		are submitted to convert the following eligible 233 & 607,0202, F.S.
Please return all corres	pondence concerning thi	s matter to:		
Jose M Veg	ga			
	Contact Person		_	
Suarez Veg	ga & Associa	tes Inc.		
	Firm/Company		_	
25 SE 2 AV	/E 410			
	Address			
MIAMI, FL.	33131			
	City, State and Zip Cod	c	_	
	ЛІ@НОТМА			
E-mail address: (to be used for future ann	ual report notifi	cation)	
	concerning this matter,	-	00	0.0440
Jose M Veg	<i>,</i>	_at (<u></u> 786	' 	0-3418
Name of C	ontact Person	Area	Code and	l 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 Fil and Certified		□\$122.50 Filing Fees. Certified Copy, and Certificate of Status
Mailing Add New Filing S Division of C P.O. Box 632	ection forporations		New I Divisi	Address: Filing Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
Noelma Investments Lic
Enter Name of the Converting Entity
2. The converting 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 10/24/2019
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> Noelma Investments Corp
Enter Name of Florida Profit Corporation
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.
5. If not effective on the date of filing, enter the effective date: 07/21/2021
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florid 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.

Signed	this 21 day of July	, <u>20</u> 2021			
	red Signature for Florida Profit Corporation:				
-	ure of Director, Officer, or, if Directors or Office		r:		
		, X			
Printed	Gabriel A Ferreiro Title: Pre	sident			
compa	red Signature(s) on behalf of Converting Florunies: [See below for required signature(s).]		_	ited liab	<u>oility</u>
Signat	ure:		_		
Printed	A Rame: Gabriel A Ferreiro	_ _{Title:} gral manager	_		
Signat	ure:	<u> </u>	_		
Printed	l Name:	Title:			
Signat	ure:		_		
Printed	l Name:	Title:	_		
Signat	ure:	<u> </u>	_		
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Signat	ure:				
Printed	I Name:	Title:			
Signat	ure:	· · · · · · · · · · · · · · · · · · ·			
Printed	1 Name:	Title:	- :	2	
	rida General Partnership or Limited Liability ure of one General Partner.	Partnership:	<u>-</u> ₩ 7.	21 AUC 30	
If Flor Signati	rida Limited Partnership or Limited Liability ures of ALL General Partners.	Limited Partnership:	:. :.	30 Fr	
	rida Limited Liability Company: ure of a Member or Authorized Representative.		-	7: 60	
All oth Signati	ners: ure of an authorized person.				
Fees:		23.7.04			
	Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)			

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME
The name of the corporation shall be: Noelma Investments Corp

ARTICLE II			
The principal p	place of business/mailing address is:		
Principal street address 150 SE 2 AVE 3RD FLOOR, MIAMI, FL. 33131		Mailing add	ress, if different is:
150 SE 2 AVE 31	RD FLOOR, MIAMI, FL. 33131		
			<u>.</u>
		·	
ARTICLE II	II PURPOSE		
	or which the corporation is organized is:		
Any and a	all allowed under the law of th	e State of Florida and th	e US of America
			<u></u>
			:: <u></u>
			2 <u>12</u> 1 AUG
	•	<u> </u>	
ARTICLE I	v shares f shares of stock is: 100 shares	no par value	
ARTICLE V		<u>RS</u>	: : :
Name and Tit	Gabriel A Ferreiro	Name and Title:	٠
Address:	2936 SW 24 Ter	Address:	
	Miami, Fl. 33145		
N. 1771		1771	
Name and 1 it	le:	Name and Title:	
Address:		Address:	
			· <u>-</u> -
Name and Tit	le:	Name and Title:	
Address:		Address:	 .
		-	

he name and Florida street address	(P.O.	. Box	NOT	acceptable)	of the	registere	dagent is:
------------------------------------	-------	-------	-----	-------------	--------	-----------	------------

Name:

Hyde, Tina

Address:

150 SE 2nd Ave 3rd. floor

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

7/31/2021

Date