

P230000047114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

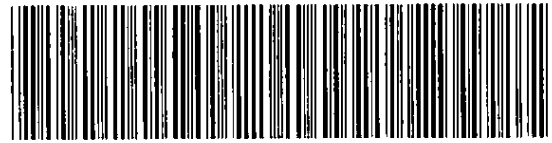
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900409736479

06/05/20 --0103L --003 **105.00

2023 JUN -5 AM 3:39
FALLA'SSIP 110110

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: International Reinsurance Lines Inc

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Sylvia Sannia

Contact Person

Entity Choice Inc.

Firm/Company

240 Crandon Blvd, Ste 167-A6

Address

Key Biscayne, FL 33149

City, State and Zip Code

support@sanniacpa.com

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

For further information concerning this matter, please call:

Sylvia Sannia at (305) 400-2031

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 ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status Certificate of Status

Mailing Address:

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

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TALLAHASSEE, FL 32303

2023 JUN -5 AM 3:39

Articles of Conversion
For
Converting Eligible Entity
Into
Florida Profit Corporation

The Articles of Conversion **and attached Articles of Incorporation** 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:

International Reinsurance Lines LLC

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 FL L22000056480
(Enter state, or if a non-U.S. entity, the name of the country)

on 2/1/2022

Enter date "Converting Entity" was first organized, formed or incorporated.

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

International Reinsurance Lines Inc

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: 6/1/23

(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida 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 10th day of May, 2023.

Required Signature for Florida Profit Corporation:

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

X

Printed Name: Eduardo Rivadeneira Title: Authorized Member

Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]

Signature: _____

Printed Name: _____ Title: _____

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:

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

FILED FOR STATE RECORD

2023 JUN -5 AM 3:40

**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: International Reinsurance Lines Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Principal street address

Mailing address, if different is:

104 Crandon Boulevard, Ste 321-A
Key Biscayne, FL 33149

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 OFFICERS AND/OR DIRECTORS

Name and Title: Eduardo J. Rivadeneira / officer

Address: 104 Crandon Boulevard, Ste 321-A
Key Biscayne, FL 33149

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: Francisco X. Rivadeneira/officer

Address: 104 Crandon Boulevard, Ste 321-A
Key Biscayne, FL 33149

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: Eduardo J. Rivadeneira

Address: 104 Crandon Boulevard, Ste 321-A

Key Biscayne, FL 33149

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

X

Required Signature/Registered Agent

5/10/2023

Date

2023 JUN -5 AM 3:39
TALLAHASSEE FLORIDA

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000056480

Entity Name: INTERNATIONAL REINSURANCE LINES LLC

Current Principal Place of Business:

104 CRANDON BOULEVARD
SUITE 321-A
KEY BISCAYNE, FL 33149

Current Mailing Address:

104 CRANDON BOULEVARD
SUITE 321-A
KEY BISCAYNE, FL 33149 US

FEI Number: 88-0692459

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVADENEIRA, EDUARDO J
104 CRANDON BOULEVARD
SUITE 321-A
KEY BISCAYNE, FL 33149 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name RIVADENEIRA, EDUARDO J
Address 104 CRANDON BOULEVARD, STE 321-A
City-State-Zip: KEY BISCAYNE FL 33149

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDUARDO RIVADENEIRA

AMBR

05/11/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date