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(Requestor's Name)
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COVER LETTER

Division of Corporations		
SUBJECT: Predictvia LLC		
	sulting Florida Limi	ted Company)
The enclosed Articles of Conversion, Articles Susiness Entity" into a "Florida Limited L	_	ion, and fees are submitted to convert an "Other y" in accordance with s. 605.1045, F.S.
Please return all correspondence concernir	ng this matter to:	
lleana L. Garcia		
(Contact Person)		-
Barbosa Legal		
(Firm/Company)		-
407 Lincoln Road PH-NE		
(Address)	· · · · · · · · · · · · · · · · · · ·	-
Miami Beach, FL 33139		
(City, State and Zip Code)	 	-
igarcia@barbosalegal.com		
E-mail Address: (to be used for future annual re	eport notifications)	-
For further information concerning this ma	atter, please call:	
lleana L. Garcia	at (305	501-4680
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the		processed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□S180.00 Filing and Certified Cop	
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

INHS11 (7/17)

Tallahassee, FL 32303

Articles of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, limited partnership,	
First organized, formed or incorporated under the laws of	are
(Enter stat	e, or if a non-U.S. entity, the name of the country)
June 11, 2019 on .	
on	
3. The name of the Florida Limited Liability Company as set fo	rth in the attached Articles of Organization:
Predictvia LLC	
(Enter Name of Florida Limited Liability Comp	any)
4. If not effective on the date of filing, enter the effective date:	
(The effective date: Cannot be prior to date of receipt or filed	date nor more than 90 calendar 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 document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
5. The plan of conversion has been approved in accordance with	all applicable statutes.

Signed this 31 day of March	20 ₂₁
Signature of Authorized Representative of	Limited Liability Company:
Signature of Authorized Representative:	Executo Oliva
Signature of Authorized Representative:	Tile Manager
Printed Name: Ernesto Olivo	Title: Manager
Signature(s) on behalf of Other Business En	ity: [See below for required signature(s)]
Signature: Strate Clip	
Signature: Ernesto Olivo	Title: Director
Clamatura	
Signature:Printed Name:	Title:
Printed Name.	Title.
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Timed Name.	11110.
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Directo	
If Directors or Officers have not been selected,	an Incorporator must sign.
If Florida General Partnership or Limited L	iability Partnership:
Signature of one General Partner.	<u></u>
If Florida Limited Partnership or Limited L	
Signatures of ALL, General Partners.	
All others:	
Signature of an authorized person.	
_	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organizat	
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Predictvia, LLC	
(Must contain the words "Limited Liability	y Company, "L.L.C., or "ELC.)
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2900 BIRD AVE APT 3	2900 BIRD AVE APT 3
MIAMI, FL 33133-4528	MIAMI, FL 33133-4528
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	egistered agent are:
Name	•
2900 BIRD AVE	EAPT 3
Florida street address (P.O	Box NOT acceptable)
MIAMI	FL 33133-4528
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	o accept service of process for the above stated limited this certificate. I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and distered agent as provided for in Chapter 605, F.S
Marcia D	verara
Registered Agent's Sign	ature (REQUIRED)
(CONTIN	LIED)

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The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	EDMEATA 0111/0
MGR	ERNESTO OLIVO
	2900 BIRD AVE APT 3
	MIAMI, FL 33133-4528
MGR	MARIA G ACEDO
	19707 NE 36TH COURT, APT 10D
	AVENTURA, FL 33180-2503
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	C 1 00
LE V: Other provisions, if any. REQUIRED SIGNATURE:	Ernesto Olivo
LE V: Other provisions, if any. REQUIRED SIGNATURE:	O UNIDAGE O UNIVERSITA
REQUIRED SIGNATURE: Signature of a member This document is executed in accord-	or an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes, I am aware to
REQUIRED SIGNATURE: Signature of a member This document is executed in accordany false information submitted in a decordany false information submitted in a decordance of the submitted in a decordance of	or an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes, I am aware to locument to the Department of State constitutes a third degree felorical contractions.
REQUIRED SIGNATURE: Signature of a member This document is executed in accordany false information submitted in a decordany false information submitted in a decordance of the submitted in a decordance of	O UNIDER O UNIV