L0700057787

(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:				
06106				

Office Use Only



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05/04/07--01002--027 **1**85**.00

PILED 07 JUN -1 AM 9: 45 SECHELÂST , STATE TALLAHASSEF FLORIN

NRC

COVER LETTER

Division of Corporations						
SUBJECT: GOOD CHO	<u></u>					
(Name of Resulting Florida Limited Company)						
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.						
Please return all correspondence concerning thi	is matter to:					
Thanh Kien (Contact Person)						
Good Choice Tile LLC (Firm/Company)						
6555 Cherry G	rove Circle					
Orlando FL 32809 (City, State and Zip Code)						
For further information concerning this matter, please call:						
Than Kien at (Name of Contact Person)	(Area Code and Daytime Telephone Number)					
Enclosed is a check for the following amount:						
	\$180.00 Filing Fees, and Certified Copy Certified Copy, and Certificate of Status					
STREET ADDRESS:	MAILING ADDRESS:					
Registration Section Division of Corporations	Registration Section Division of Corporations					
Clifton Building	P. O. Box 6327					
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314					

Certificate of Conversion For "Other Business Entity" Into

FILED

07 JUN - 1 AM 9: 45

SECRETART OF STATE
TALLAHASSEE, FLORIDA

Florida Limited Liability Company

This Certificate 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.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filling of this				
Certificate of Conversion is: TTA TILE INC POS-7363 (Enter Name of Other Business Entity)				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a <u>COVDOVATION</u> . (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)				
first organized, formed or incorporated under the laws of Flovida (Enter state, or if a non-U.S. entity, the name of the country)				
on MA 19 2005. (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:				
FLORI da.				
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:				
TTA TILE LLC				
(Enter Name of Florida Limited Liability Company)				

docum effectiv	ot effective on the date of filing, enter the effective date: 1) cannot be prior to nor mater is filed by the Florida Department of we date listed in the attached Articles of Catherein.)	State; AND 2) must be the same as th
Signed	this day of	20
Signati	ure of Authorized Person: <u>Than</u>	Mien
Printed	I Name: Thanh Kien Title	: member
Fees:		
	Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Lin	nited Liability Company is:		
(Must end with the words "L.C.,")	"Limited Liability Company, "Limited	Company" or their abbreviation	n "LLC," or
ARTICLE II - Add The mailing address Liability Company is	and street address of the prin	ncipal office of the Lim	ited
Principal Office Ad	ldress:	Mailing Address:	
ARTICLE III - Reg Signature:	gistered Agent, Registered Company cannot serve as its own Register	Office, & Registered A	agent's
individual or another business entity with an act		· ·	O7 JI SECH
The name and the Fl	lorida street address of the replacement of the local street address (P.O. E. S.T. Pefersburg City, State,	/e. NORTH Box NOT acceptable)	FILED O7 JUN - 1 AH 9: 45 SECKE 1/4 N E FLORIDA JALLAHASSEE, FLORIDA
	City, State,	and Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR_ (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)