109000173192

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



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SECRETARY OF STATE ALLAHASSEE, FLORING

D. BRUCE
JUL 3 0 2009
EXAMINER

COVER LETTER

TO:

Registration Section

Division of C	orporations				
SUBJECT: UbiqOdin	n, LLC				
	(Name of Resulting	Florida	1 Limited	Company)	
	isiness Entity" into a '				and fees are submitted to ity Company" in
Please return all corre	espondence concernin	g this	matter t	o:	
Barry L. Ogline					
	(Contact Person)				<i>,</i> •
UbiqOdin, LLC			_		5 0 0
	(Firm/Company)				E. 6
630 S. Wickham Road	Suite 206				JUL 29 PH 12: 2 CRETARY OF STAL LAHASSEE. FLOR
	(Address)				SS AR
					E O TO
Melbourne, FL 32904	City, State and Zip Code)			···	
(0	only, State and Zip Code;				9≥ %
For further information	on concerning this ma	tter, p	lease ca	11:	DA O
Marion J Ogline		at (321) 5944	370
(Name of Conta	ct Person)	(_			ytime Telephone Number)
Enclosed is a check for	or the following amou	ınt:			
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status		80.00 Fil Certified (□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S :		MA]	ILING A	DDRESS:
Registration Section			Registration Section		
Division of Corporati	ons		Division of Corporations		
Clifton Building			P. O. Box 6327		
2661 Executive Center			Talla	ahassee, F	FL 32314
Tallahassee, FL 3230	01				

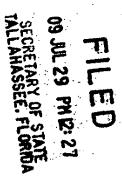


FLORIDA DEPARTMENT OF STATE Division of Corporations

July 21, 2009

BARRY L. OGLINE 630 S. WICKHAM ROAD, SUITE 206 MELBOURNE, FL 32904

SUBJECT: UBIQODIN, LLC Ref. Number: W09000033257



We have received your document for UBIQODIN, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The attached form must be completed in order to file the document.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 409A00025023

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a LLC		
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)		
first organized, formed or incorporated under the laws of Pennsylvania (Enter state, or if a non-U.S. entity, the name of the country)	<u></u>	
on June 13, 2008 (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:		
Pennsylvania	28	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	FILE IN	1 222 775
(Enter Name of Florida Limited Liability Company)	2 D	
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this		:

Signed	this 16 day of July	20 <u>09</u> .	
Signat	ure of Member or Authorized Represent	ative of Limited Liability	y Company:
	ure of Member or Authorized Representativ Name: <u>Marion J. Ogline</u>		
Signat	ure(s) on behalf of Other Business Entity:	See below for required s	ignature(s).
	Name: MAMONTOS/INC		ber
Signatu Printed	ure:	Title:	
Signatu Printed	re:	Title:	
Signatu Printed	ure:	Title:	
Signatu Printed	ure: Name:	Title	
rinted	rvaine.	1 mc	Z'0 5
Signatu	ıre:		<u>E</u> g_3
Printed	Name:	Title:	
	ida Corporation: are of Chairman, Vice Chairman, Director, or	Officer.	ARY O
	ctors or Officers have not been selected, an In		PH S
	ida General Partnership or Limited Liabili ure of one General Partner.	ty Partnership:	STATE LORIDA
	ida Limited Partnership or Limited Liabili ares of <u>ALL</u> General Partners.	ty Limited Partnership:	
All oth Signatu	ners: nre of an authorized person.	-	
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

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation

ARTICLE I - Name:

The name of the Limited Liability Company is:

incipal Office Address:	Mailing Address:	
030 S.WICKHAM ROAD	SAME	
ELBOURNE, FL 32904		
ec. Scarice, PD SC 101		
vidual or another	Biologo . Bow on and	
ividual or another isiness entity with an active Florida registration.) The name and the Florida street address of the initial street address of the initial street address.	e registered agent are:	SECRETA
ne Limited Liability Company cannot serve as its own Relividual or another usiness entity with an active Florida registration.) The name and the Florida street address of the MALION T Co	e registered agent are: しいい ビ	SECRETARY
vidual or another siness entity with an active Florida registration.) e name and the Florida street address of the MALIGN T Co.	e registered agent are: しん ビ	SECRETARY OF
ividual or another isiness entity with an active Florida registration.) The name and the Florida street address of the MALIGHT CONTROL Na. 2075 HIGHWAY A	e registered agent are: L, ルビ me エA # 2609	SECRETARY OF
widual or another iness entity with an active Florida registration.) e name and the Florida street address of the MALIGM T C G Na 2075 HIGHWAY A	e registered agent are: Li へ ビ me - エ A # 2 6 0 9 O. Box <u>NOT</u> acceptable)	SECRETARY OF STATE

Registered Agent's Signature (REQUIRED)

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..

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	MARION J OSINA 2075 Highway AIA #2604 INDIAN HARBOUR BEACH, FL 32937
MGRM	BARRY L Ogline 2075 Hahway A IA # 2604 INVIAN HARBOUR GEACH, FL 32937
MGRM	JT Dylan Oclinio 4518 Lany HANKWay West Melbourne FL 32964
MGRM	JOSEPH KASHURA 714 S. CENTER AVE SOME PLSET PA (1997) (Use attachment if necessary)
ARTICLE V: Effective date, if other than the d (The effective date: 1) cannot be prior to no document is filed by the Florida Department the effective date listed in the attached Cer date is listed therein.)	(OPTIONAL) r more than 90 days after the date of State; AND 2) must be the same as
REQUIRED SIGNATURE: Signature of a member or an auth	orized representative of a member.
(In accordance with section 608.40 of this document constitutes an affir	8(3), Florida Statutes, the execution mation under the penalties of perjury ed herein are true.)
Marin Z Octive Typed or printe	& d name of signee
<u>Filing Fees:</u>	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)