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| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ldress) | |
| (Ac | ddress) | <u>.</u> |
| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nai | me), |
| (Do | ocument Number | |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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U. MCLEOD



8551 West Sunrise Blvd., Suite 208 Ft. Lauderdale, FL 33322 T 954.370.2222 F 954.370.2211
PAUL M. BLOOMGARDEN • CHERRIE F. GOUDREAU • PHILIP C. ROSEN

March 14, 2013

Florida Department of State Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Att: Gina McLeod

Re:

COD Solutions, LLC

Ref: W13000013955

Dear Ms. McLeod:

Pursuant to your March 11, 2013 letter regarding the above Certificate of Conversion, enclosed please find the following:

VIA FEDERAL EXPRESS

- 1. A copy of your March 11, 2013 letter.
- 2. Our Cover letter.
- 3. Certificate of Conversion.
- 4. Articles of Organization.
- 5. Our check #2652 made payable to the Florida Department of State in the amount of \$150.00.

Please file the same and return the filed documents to me via Federal Express. An air bill and envelope is enclosed for your convenience. Thank you for your prompt attention to the above.

Very truly yours,

Fredda Fierro, Secretary to

Horacio Sosa

/ff

Enc. ht/13-1130 13-244H

March 11, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

BLOOMGARDEN, GOUDREAU, ROSEN

SUBJECT: COD SOLUTIONS, LLC

REF: W13000013955

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A Certificate of Conversion cannot be filed electronically. You must submit the certificate of conversion and the articles by mail.

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) 245-6051.

Gina McLeod Regulatory Specialist II FAX Aud. #: H13000054977 Letter Number: 413A00005708

COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: COD SOLUTIONS, LLC |
| (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 this matter to: |
| Horacio Sosa, Esq. |
| (Contact Person) |
| Bloomgarden, Goudreau & Rosen, P.A. |
| (Firm/Company) |
| 8551 W. Sunrise Blvd., #208 |
| (Address) |
| Ft. Lauderdale, FL 33322 |
| (City, State and Zip Code) |
| HSosa@lawbgr.com |
| E-mail address: (to be used for future annual report notifications) |
| For further information concerning this matter, please call: |
| Horacio Sosa at (954) 370-2222 |
| (Name of Contact Person) (Area Code and Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$\frac{1}{2}\$\$150.00 Filing Fees (\$\frac{1}{2}\$5 for Conversion & \$125 for Articles of Organization)\$\$ \$\$155.00 Filing Fees and Certificate of Status |
| STREET ADDRESS: MAILING ADDRESS: |
| Registration Section Registration Section |
| Division of Corporations Clifton Building Division of Corporations P. O. Box 6327 |
| 2661 Executive Center Circle Tallahassee, FL 32314 |
| Tallahassee, FL 32301 |

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.

| 1. The name of the "Other Business Entity" immediately prior to the filing of this Certific | ate of | | |
|--|------------|----------|----------|
| Conversion is: | | | |
| COD Solutions, Corp. | ***** | | |
| (Enter Name of Other Business Entity) | 190 gr. | | |
| | 31.02.01 | ω ~ | |
| 2. The "Other Business Entity" is a <u>corporation</u> . | 138 674 | MAR | L |
| (Enter entity type. Example: corporation, limited partnership, | | 22 | Metge. |
| general partnership, common law or business trust, etc.) | 2014 | \sim |) 4 |
| | en Cir | ™ | |
| first organized, formed or incorporated under the laws of Florida | . <u>I</u> | | _ |
| (Enter state, or if a non-U.S. entity, the name of the country) | Z. | 2 | |
| | TAKES | 9 | |
| on <u>9/30/2010</u> | , | | |
| (Enter date "Other Business Entity" was first organized, formed or incorpo | rated) | | |
| · · | | | |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country und | er the la | aws of | • |
| which it is now organized, formed or incorporated: | | | |
| · · · · · · · · · · · · · · · · · · · | | | |
| | | | • |
| | | | |
| 4. The name of the Florida Limited Liability Company as set forth in the attached Article | les of | | |
| Organization: | | | |
| | | | |
| COD Solutions, LLC | | | |
| (Enter Name of Florida Limited Liability Company) | | | |
| (Ditter Nume of Florida Difference Diability Company) | | | |
| 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 d | acumai | nt ic | |
| filed by the Florida Department of State; AND 2) must be the same as the effective d | | | ha |
| · · · · · · · · · · · · · · · · · · · | are more | JU III L | пс |
| attached Articles of Organization, if an effective date is listed therein.) | | | |
| 6 The communication is a committed by the complicable larger's committee the cather bearings and | الملمية و | | |
| 6. The conversion is permitted by the applicable law(s) governing the other business entit | | | |
| conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting | g the co | nversi | on. |

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

| Signed this 13 day of | FEBRUARY | 20 <u>13</u> | | |
|--|---|-----------------|--|---|
| Signature of Member or Au Individual signing affirms th constitutes a third degree fel | at the facts stated in t | his document | are true. Any fals | |
| Signature of Member or Auth Printed Name: Jhonattan | orized Representative Rivero | Title: Di | irector | · |
| Signature(s) on behalf of Oth this document are true. Any s.817.155, E.S. [See below for Signature: | (alse information cons required signature(s) | titutes a third | gning affirm(s) th d degree felony as | at the facts stated in provided for in |
| Printed Name: Jhonattan | Rivero | Title: Dire | ector | |
| Signature: | | | | |
| Signature:Printed Name: | | Title: | | |
| Signature: Printed Name: | | Title: | | |
| Signature: Printed Name: | | Title: | | |
| Signature:Printed Name: | | Title | · · · · · · · · · · · · · · · · · · · | |
| | | | | |
| Signature:Printed Name: | | Title: | | |
| If Florida Corporation: Signature of Chairman, Vice C If Directors or Officers have no | ot been selected, an Inc | orporator must | • | |
| If Florida General Partnersh Signature of one General Partn | er. | / Partnersnip | <u>:</u> | |
| If Florida Limited Partnersh Signatures of <u>ALL</u> General Pa | ip or Limited Liability rtners. | Limited Par | tnership: | |
| All others: Signature of an authorized pers | son. | | | |
| Fees: | | | | |
| Certificate of Conversion: Fees for Florida Articles of O Certified Copy: Certificate of Status: | \$30.00 \$5.00 (| | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | |
|--|--|
| COD Solutions, LLC (Must end with the words "Limited Liability | y Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the print | ncipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 10480 NW 37 Terrace Doral, FL 33178 | 10480 NW 37 Terrace Doral, FL 33178 |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the reconstruction. | red Agent. You must designate an individual or another |
| The name and the Florida street address of the re- | gistered agent are. |
| Horacio Sosa Name | |
| 8551 W. Sunrise Blvd., | #208 |
| | ess (P.O. Box NOT acceptable) |
| Ft. Lauderdale | FL 33322 |
| City, State | e, and Zip |
| liability company at the place designated in the registered agent and agree to act in this capacity all statutes relating to the proper and complete | |

Page 1 of 2

| <u>Title:</u> | Name and Address: |
|--|--|
| "MGR" = Manager "MGRM" = Managing | g Member |
| MGR | Jhonattan Rivero |
| | 10480 NW 37 Terrace |
| | Doral, FL 33178 |
| MGR | Fabiana Montufar |
| | 10480 NW 37 Terrace |
| | Doral, FL 33178 |
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| Alea attachment if no | Caccara) |
| (Use attachment if nec | cessary) |
| | te, if other than the date of filing: |
| FICLE V: Effective dat | te, if other than the date of filing: (OPTIONAL) |
| FICLE V: Effective date effective date of the cannot be formed as the cannot be set to | te, if other than the date of filing: |
| ICLE V: Effective dat effective date: 1) cann lorida Department of ificate of Conversion, i | te, if other than the date of filing: (OPTIONAL) not be prior to nor more than 90 days after the date this document is filed f State; AND 2) must be the same as the effective date listed in the attacl if an effective date listed therein.) |
| TICLE V: Effective date of the control of the contr | te, if other than the date of filing: (OPTIONAL) not be prior to nor more than 90 days after the date this document is filed f State; AND 2) must be the same as the effective date listed in the attacl if an effective date listed therein.) |
| FICLE V: Effective date of the control of the contr | te, if other than the date of filing: (OPTIONAL) not be prior to nor more than 90 days after the date this document is filed f State; AND 2) must be the same as the effective date listed in the attacl if an effective date listed therein.) |
| FICLE V: Effective date effective date: 1) cann Florida Department of ificate of Conversion, in the conversion of the co | te, if other than the date of filing: (OPTIONAL) not be prior to nor more than 90 days after the date this document is filed f State; AND 2) must be the same as the effective date listed in the attacl if an effective date listed therein.) |
| effective date: 1) cannot effective date: 1) | te, if other than the date of filing: (OPTIONAL) not be prior to nor more than 90 days after the date this document is filed f State; AND 2) must be the same as the effective date listed in the attacl if an effective date listed therein.) |
| FICLE V: Effective date effective date: 1) cannot be effective date: 1) ca | not be prior to nor more than 90 days after the date this document is filed if State; AND 2) must be the same as the effective date listed in the attach if an effective date listed therein.) Linear or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation unant the facts stated herein are true. I am aware that any false information submitted in a tent of State constitutes a third degree felony as provided for in s.817.155, F.S.) |