

L040000078675

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

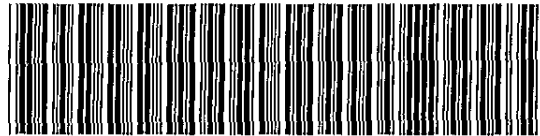
(Document Number)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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RECEIVED

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10/28/04

Smoler, Lerman, Bente

Requestor's Name

Address

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City

State

ZIP

Phone

CORPORATION(S) NAME

F & L Properties, LLC

() Profit

() NonProfit

() Amendment

() Merger

() Foreign

() Dissolution

() Mark

() Limited Partnership

() Annual Report

() Other

() Reinstatement

() Reservation

() Change of Registered Agent

(X) Certified Copy

() Photo Copies

() Certificate Under Seal

() Call When Ready

() Call If Problem

() After 4:30

(X) Walk In

() Will Wait

(X) Pick Up

() Mail Out

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier



Empire Toll Free: 1-800-432-3028

**CERTIFICATE OF CONVERSION FROM GENERAL PARTNERSHIP
TO LIMITED LIABILITY COMPANY**

1. On July 31, 1981 the Florida general partnership of **EVA FELDMAN and ISIDORO LERMAN, TRUSTEES d/b/a F & L PROPERTIES** (hereinafter **F & L PROPERTIES**) was created pursuant to Florida law.
2. **F & L PROPERTIES**, a Florida general partnership, is the immediately prior entity to this conversion to a limited liability company.
3. **F & L PROPERTIES, LLC** is the name of the Florida limited liability company as set forth in its Articles of Organization in accordance with the filing with Florida's Secretary of State.
4. The conversion of **F & L PROPERTIES** to **F & L PROPERTIES, LLC**, a Florida limited liability company shall be effective as of the date of filing the Certificate of Conversion and Articles of Organization with Florida's Secretary of State.

By: _____

Jorge Lerman, managing member
F & L PROPERTIES, LLC

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

F & L PROPERTIES, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

48 East Flagler Street

PH #101

Miami, FL 33131

Mailing Address:

48 East Flagler Street

PH #101

Miami, FL 33131

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Jorge Lerman

Name

48 East Flagler Street, PH #101

Florida street address (P.O. Box **NOT** acceptable)

Miami

FL

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

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

JORGE LERMAN

48 EAST FLAGLER STREET, PH 101

MIAMI, FL 33131

MGRM

Isidoro Lerman

48 East Flagler St. PH 101

Miami, FL 33131

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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)

JORGE LERMAN

Typed or printed name of signer

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)