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OUTHAR

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Dean Myerow Associates LLC (Name of Resulting Florida Limited Company)
The enclosed Articles 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. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Dean Myerow Associates LLC (Firm/Company) 324 Coconut Isle DR
324 Coconut Isle DR (Address) Fort Lauderdule, FL 33301 (City, State and Zip Code) dean. Myerow@gmail.com E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Dean Myerow at (914) 391-7714 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

THISIT (06/15) Please note that we are already a foreign of LLC in Florida, upon conversion please dissolve the foreign LLC.

Articles of Conversion For

"Other Business Entity"

Into

Florida Limited Liability Company

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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.635.1045. Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
Dean Myerow Associates LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Composett on Limited Lind, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,</u>
general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Dean Myerow Associates LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 3/5/6. (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective
date listed in the attached Articles of Organization, if an effective date is listed therein.) — Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 15 day of March	20 <u>/6</u> .		
Signature of Authorized Representative of Limit	ted Liability Company:		
Signature of Authorized Representative: Printed Name: Dean Myanum	an a Myeron Title: Manalying Hembe		
Signature(s) on behalf of Other Business Entity:	•		
Signature: Dean Myeron	Title: Managing Member		
Signature: Printed Name:	m: I		
Printed Name:	Title:		
Signature:Printed Name:			
Printed Name:	Title:		
Signature:			
Signature:Printed Name:	Title:	APR	g .
Signature:		- 38 - 38 - 38	ETTERCES (CONTRACTOR)
Signature:Printed Name:	Title:	HE P	i
Signature		man proper	[CONTENSION OF
Signature: Printed Name:	Title:	4:5 ORIL	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.			
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.			
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.			
All others: Signature of an authorized person.			
Fees:			

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Dean Myerow Associates LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
324 Coconvt Isk Dr 324 Coconvt Isk Dr Fort Landardule, FL Fort Landardule, FL 33301 33301
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Decen Myerow Name 324 Coconst Is le Dr Florida street address (P.O. Box NOT acceptable) Fort Lev dordule FL 33301 City Zip
City 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 605, F.S Registered Agent's Signature (REQUIRED))

(CONTINUED)

Company:	
<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
Dean Myerow MGR Marcie Myerow AMBR	324 (oconut Isk Dr Fort Lauderdu Do, FL 33301
Marcie Myerow AMBR	Fort Lauderdalo, FIE 32301
(Use attachment if necessary)	
to or 90 days after the date of filing.)	be specific and cannot be more than five business days prior the applicable statutory filing requirements, this date will not be listed as the
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	a Myeral
This document is executed in acc I am aware that any false informs constitutes a third degree felony a Dean	Myeron
Тур	ed or printed name of signee Filing Fees
\$125.00 Filing Fee for Articles of \$ 30.00 Certified Copy (Optiona	Organization and Designation of Registered Agent l) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-