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| PICK-UP | ☐ WAIT | MAIL | |
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| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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EXAMINER

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SECRETARY OF STATE
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| CORPDIRECT AGE 515 EAST PARK AV TALLAHASSEE, FL 222-1173 | ENUE . | merly CCRS) | · · · · |
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| FILING COVER S ACCT. #FCA-14 | SHEET | · | PICAL AND LONG THE PROPERTY OF |
| CONTACT: | ASHLEY S | <u>MITH</u> | |
| DATE: | <u>01-22-2008</u> | | OF. |
| REF. #: | 000170.8030 | <u>)4</u> | |
| CORP. NAME: | SME CAPI | TAL LIMITED PARTNERSHIP | |
| () ARTICLES OF INCO () ANNUAL REPORT () FOREIGN QUALIFIC () REINSTATEMENT () CERTIFICATE OF C (XX) OTHER: CERTIF | CATION CANCELLATION CICATE OF CON | | () ARTICLES OF DISSOLUTION () FICTITIOUS NAME () LIMITED LIABILITY () WITHDRAWAL FOR \$ 1061.25 |
| AUTHORIZATI | ON FOR A | CCOUNT IF TO BE DEBITI | ED: |
| | | COST LI | IMIT: \$ |
| PLEASE RETUR | RN: | | |
| () CERTIFIED COPY (XX) CERTIFICATE O | | ERTIFICATE OF GOOD STANDING | (XX) PLAIN STAMPED COPY |
| Examiner's Initials | S | | |



Certificate of Conversion

For

"Other Business Organization"

Into

Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

SME Capital Limited Partnership

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited partnership

(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Nevada

(Enter state, or if a non-U.S. entity, the name of the country)

on September 26, 2000

(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:

SME Capital Limited Partnership

(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)

| 4. The conversion was approved as required by Chapter such a manner that complied with the converting organization. | | |
|---|---------------------|---|
| 5. If not effective on the date of filing, enter the effective | e date | : |
| (The effective date: 1) cannot be prior to nor more the document is filed by the Florida Department of State; the effective date listed in the attached Certificate of I effective date is listed therein.) | an 90 <u>ANI</u> | days after the date this 2) must be the same as |
| Signed this 18 th day of January | 2 | 0.08 |
| Signature of Each General Partner Listed in Attached Cen | rtifica | ate of Limited Partnership: |
| ESRICK ENTERPRISES, INC. | | |
| | | |
| 5/ | | |
| by: Steven M. Esrick, President | | |
| | | |
| | | |
| Fees: | | |
| Certificate of Conversion: Fees for Florida Certificate of Limited Partnership (\$965 Filing Fee and \$35 Filing Fee) | \$ p: \$1 | 52.50 ,000.00 |
| Certified Copy: | \$ | 52.50 (Optional) |
| Certificate of Status: | \$ | 8.75 (Optional) |

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP



. SME Capital Limited Partnership

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

| _{2_} 17633 Gunn Highway, #241 |
|---|
| (Street address of initial designated office) |
| Odessa, Florida 33556 |
| Steven M. Esrick |
| (Name of Registered Agent for Service of Process) |
| _{4_} 17633 Gunn Highway, #241 |
| (Florida street address for Registered Agent) |
| Odessa, Florida 33556 |
| 5. I hereby accept the appointment as registered agent and agree to uct in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. |
| Signature of Registered Agent |
| _{5.} 17633 Gunn Highway, #241 |
| (Mailing address of initial designated office) |
| Odessa, Florida 33556 |
| 7. If limited partnership elects to be a limited liability limited partnership, check box |

| 10 (1 | \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75 Page 2 of 2 |
|--|---|
| | by: Steven M. Esrick, President |
| | ESRICK ENTERPRISES, INC. |
| Signature of each general partner: | |
| filed by the Florida Department of St Signed this 18 th day of | |
| (Effective date cannot be prior to nor | more than 90 days after the date the document is |
| 9. Effective date, if other than the date of fil | ng: |
| | |
| | |
| | |
| | |
| | |
| | |
| - 40 Jan 02 (| 703 |
| Da 444 1 17 | Odessa, Florida 33556 |
| Esrick Enterprises, Inc. | 17633 Gunn Highway, #241 |
| Name: | Business Address: |