(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
∴ Certified Copies
Special Instructions to Filing Officer:
789 (011,
101 411

Office Use Only

WA-36312



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08/10/09--01065--006 **1052.50

M. THOMAS

AUG 2 1 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ		Sunflex Wall Systems, LP	
	Name of Resulting Florida	Limited Partnership or Limited Liability Limited Partnership	
submit	tted to convert an "Other Orga	ion, Certificate of Limited Partnership, and fees are inization" into a Florida Limited Partnership or in accordance with s. 620.2104, F.S.	
Please	return all correspondence con	cerning this matter to:	
	Annette Jung Contact Person		
	AC Global Managem Firm/Company		ч
	5830 Copper Leaf Address	f Lane TAIS	
	Naples, FL 341 City, State and Zip (Code HAS:	FILE
E-r	mail address: (to be used for future a	annual report notification)	3
For fu	rther information concerning the		
	Annette Jung	at (239) 455-1662 >	,
Enclos	Name of Contact Person ed is a check for the following	Area Code and Daytime Telephone Number g amount:	
(\$52.50	52.50 Filing Fees \$\int_\$\$1,061.25 File for Conversion and Certificate of 000 - Certificate) Status	ing Fees \$\int_\$\$1,105.00 Filing Fees \$\int_\$\$1,113.75 Filing Fees, f and Certified Copy Certified Copy, and Certificate of Status	
Registr Divisio	ET ADDRESS: ration Section on of Corporations a Building	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327	
	Executive Center Circle	Tallahassee FL 32314	

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 11, 2009

ANNETTE JUNG 5830 COOPER LEAF LANE NAPLESL, FL 34116

SUBJECT: SUNFLEX WALL SYSTEMS LP

Ref. Number: W09000036312

We have received your document for SUNFLEX WALL SYSTEMS LP and your check(s) totaling \$1052.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 909A00027357

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PMIC 8-12-09

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" im	imediately prio	r to the filing of t	this
Certificate of Conversion is:			00
0 1 11 11 0		f(X)	X
Sunflex Wall Sy			<u></u>
(Enter Name of Other	r Business Ent	ity)	\$5 S
		. 5	F8 =
2. The "Other Business Entity" is a		<u>LP</u>	<u> </u>
(Enter entity type. Example: corp			pany 2
general partnership, common	law or busine	ess trust, etc.)	SEA
		Ci-	in a
first organized, formed or incorporated under the		Georgia	<u> </u>
(Enter state, or if a non-U.S. ent	ity, the name o	of the country)	
07.46.0000			200
on 07-16-2008			. 5
(Enter date "Other Business Entity" was fi	rst organized,	formed or incom	rporated)
a miles e constant ple the file to be accepted.		and the art to the day of the	
3. The name of the Florida Limited Partnership			artnersnip
as set forth in the attached Certificate of Limi	iteu Partnersn	ıh:	
Sunflex Wall S	ystems, LP		
(Enter Name of Florida Limited Partne	ership or Limi	ted Liability Lir	nited
Partnership	-	•	
•	•		
4. The conversion was approved as required by	y Chapter 620,	F.S., and was app	proved in
such a manner that complied with the converting	ig organization	's governing law	
5. If not effective on the date of filing, enter the			
(The effective date: 1) cannot be prior to 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 Certi-	ficate of Limit	ed Partnership,	if an
effective date is listed therein.)			

Signed thisday of	20
Signature of Each General Partner Listed in Attach Partnership/Limited Liability Limited Partnership:	
Signature: Printed Name: Malte Schneider Ti	
Printed Name: Malte Schneider Ti	itle: Partner
Signature: Ti	itle:
Signature:	
Printed Name:Ti	itle:
Signature:	2
Printed Name: Ti	ida.
Signature:	ECRET AH
Printed Name: Ti	
	ETC P
Signature: Ti	itle:
	ガムの
Required Signature(s) on behalf of Other Business En signature(s).]	tity: [See below for required]
Signature:	
Printed Name: Malte Schneider Ti	itle: President of Sunflex, Inc - 🔓
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer If Directors or Officers have not been selected, an Incorporation.	
If Florida General Partnership or Limited Liability Partnership	artnershin:
Signature of one General Partner.	
Territoria III de la III de la Companya	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fees:	
Certificate of Conversion:	\$ 52.50
Fees for Florida Certificate of Limited Partnersl (\$965 Filing Fee and \$35 Filing Fee)	hip: \$1,000.00
Certified Copy:	\$ 52.50 (Optional)
Certificate of Status:	\$ 8.75 (Optional)

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

1	Sunflex Wall Systems, LP
Acc	(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) ceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. ceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. LLLP.
2	28400 Old US 41 Road # 5, Bonita Springs, FL 34135
_	Street address of initial designated office
3.	AC Global Management, LLC
	Name of Registered Agent for Service of Process
4.	5830 Copper Leaf Lane, Naples, FL 34116
_	Florida street address for Registered Agent
con	I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to apply with the provisions of all statutes relative to the proper and complete performance of my duties, I am familiar with an accept the obligations of my position as registered agent.
	Printe Dung Signature of Registered Agent
6.	28400 Old US 41 Road # 5, Bonita Springs, FL 34135
	Mailing address of initial designated office
7.	If limited partnership elects to be a limited liability limited partnership, check box

8. Name and business address of each Name:	general partner: <u>Business Address:</u>
Sunflex,inc.	28400 Old US 41 Road # 5
(FO8-4122)	Bonita Springs, FL 34135
	TALLARIA ST
	8: 50 FLORIDA FLORIDA
9. Effective date, if other than the date of filing	· · · · · · · · · · · · · · · · · · ·
filed by the Florida Department of State	
Signed this day of	August 2009
Signature of each general partner:	Sunfler Inc.
Filing Fees: \$1 Certified Copy (optional): \$ Certificate of Status (optional): \$	1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) 52.50 8.75