

LOS000049794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:



100054270331

05/13/05--01023--002 \*\*185.00

2005 MAY 13 AM 12

NAME	
ADDRESS	
CITY	
STATE	
ZIP	
PHONE	
DATE	
TIME	
OFFICE USE ONLY	
RECEIVED	
BY	
DATE	
TIME	
ADDITIONAL INFO	
RECEIVED	
BY	
DATE	
TIME	

**TRANSMITTAL LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: HEW COMPLETE WINDOW TREATMENT, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HOWARD L. WEINSTEIN  
(Name of Person)

HEW COMPLETE WINDOW TREATMENT, LLC  
(Firm/Company)

2940 E. AVIARY DRIVE  
(Address)

COOPER CITY, FLORIDA 33026  
(City/State and Zip Code)

For further information concerning this matter, please call:

HOWARD L. WEINSTEIN at ( 954 ) 435-2940  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

3  
MAY 12

**CERTIFICATE OF CONVERSION**

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the attached articles of organization and this certificate of conversion to convert to a Florida limited liability company:

FIRST: The name of the unincorporated business immediately prior to filing this document was:

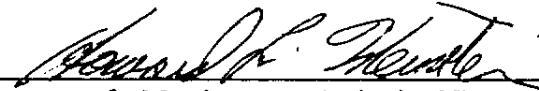
HEW COMPLETE WINDOW TREATMENT

SECOND: The date on which and the jurisdiction in which the unincorporated business was first created or otherwise came into being are:

- A. Date: 1990
- B. Jurisdiction: BROWARD COUNTY, FLORIDA
- C. If different from the above noted jurisdiction, the jurisdiction immediately prior to its conversion: \_\_\_\_\_

THIRD: The name of the limited liability company as set forth in the attached articles of organization is:

HEW COMPLETE WINDOW TREATMENT, LLC

  
 \_\_\_\_\_  
 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.)

HOWARD L. WEINSTEIN

Typed or Printed Name of Signee

**FILING FEES:**

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Filing Fee for Registered Agent Designation
- \$ 25.00 Filing Fee for Certificate of Conversion
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)

APR 13 2012

*(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.)*

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HEW COMPLETE WINDOW TREATMENT, 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:

2940 E. AVIARY DRIVE  
COOPER CITY, FL 33026

SAME

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

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

HOWARD L. WEINSTEIN  
Name

2940 E. AVIARY DRIVE  
Florida street address (P.O. Box NOT acceptable)

COOPER CITY FL 33026  
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

8  
A  
11:12

(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:**


MGR

HOWARD L. WEINSTEIN  
2940 E. AVIARY DRIVE  
COOPER CITY, FL 33026

(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.)

HOWARD L. WEINSTEIN  
\_\_\_\_\_  
Typed or printed name of signee

**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)

RECEIVED  
MAY 13 AM 11:12