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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: J.A. LAS OPLSA + ASSOCIATES, 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:
STEVEN HELLER (Name of Person)
SBC F INANCIAL SFAVICES INC (Firm/Company)
123 NW 13 57NEET SUITE 21406 (Address)
BOCA RATON FUNDA 33432 (City/State and Zip Code)
For further information concerning this matter, please call:
Save Huen at Sol 7/5-9200 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
☐ \$125.00 Filing Fee Certificate of Status ☐ \$130.00 Filing Fee Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

409 E. Gaines Street Tallahassee, Florida 32399

Tallahassee, Florida 32314

J.A. LASORSA & ASSOCIATES, LLC 1390 S. FEDERAL HIGHWAY POMPANO BEACH, FL 33062 (954)783-5020

May 31, 2005

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE:M05000001716 and attachments

Dear Sir or Madam:

I hereby attach a certificate of conversion which will make my foreign LLC a Florida LLC along with the attached articles of organization for J.A. Lasorsa & Associates, LLC.

The attached check for \$150 should cover this as per your office.

Should you have any questions or need additional information, please don't hesitate to contact me.

Please process accordingly.

Sincerely yours,

J.A. Lasorsa & Associates, LLC.

Joseph A. LaSorsa Managing Member

05 JUN -6 PM 3: 42

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:
	A,	LASORSA + ASSOCIATES, LLC.
created	or oth A. B.	
(J.	If different from the above noted jurisdiction, the jurisdiction immediately prior to its conversion:
organiza	ation	name of the limited liability company as set forth in the <u>attached</u> articles of is: LASORSA + ASSOCIATES 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.)
		TOSEPH B. LA SOLSA 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)

(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.973

INHS11(10/99)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J.A. LASORSA + ASSOCIATES 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:

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

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

JOSEPH A. LA SONSA

1390 V. FEDERM MOTACCEPTABLE)

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

POMPANO BEACLE 330 62

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..

(CONTINUED)

Page 1 of 2

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

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

NG-RM_	TOUEPH A. LA VORSA 1390 S. PEDELAN HICHWAY POMPANO BEACH, PL 33062
··, ,	
	
Use attachment if necessary)	

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.)

TOSEDIH A. CASORSA

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)