

W6000017292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

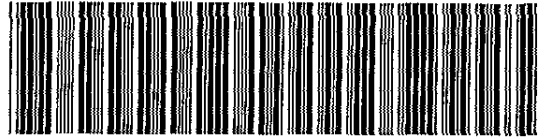
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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01/24/06--01041--015 \*\*43.75

02/16/06--01003--010 \*\*106.25

Cow.

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TREASURY DEPARTMENT

FILED

W6-17292  
qr

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PHILIPPINE ORIENTAL STORE, INC.  
(Name of Florida Profit Corporation)

The enclosed Certificate of Conversion and fee(s) are submitted to convert a Florida Profit Corporation into an "Other Business Entity" in accordance with s. 607.1113, F.S.

Please return all correspondence concerning this matter to:

FLORA C. BOYLE

(Contact Person)

PHILIPPINE ORIENTAL STORE, INC.

(Firm/Company)

10910 N 30th Street

(Address)

TAMPA, FL 33612

(City, State and Zip Code)

For further information concerning this matter, please call:

EMIDIO J. GERMINO

(Name of Contact Person)

at ( 813 )

907- 0239

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☒ \$43.75 Filing Fee  
and Certificate of  
Status

☐ \$43.75 Filing Fee  
and Certified Copy

☐ \$52.50 Filing Fee  
Certified Copy, and  
Certificate of Status

**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

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 30, 2006

FLORA BOYLE  
10910 N 30TH STREET  
TAMPA, FL 33612

SUBJECT: PHILIPPINE ORIENTAL STORE, INC.  
Ref. Number: P03000032357

We have received your document for PHILIPPINE ORIENTAL STORE, INC. and check(s) totaling \$43.75 of which \$ has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$106.25 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

The Certificate of Conversion must state the effective date of the conversion. The effective date cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date of the conversion under the laws governing the other business entity.

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) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 606A00006530

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PHILIPPINE ORINTAL STORE  
(Name of Resulting Florida Limited Company)

The enclosed Certificate 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. 608.439, F.S.

Please return all correspondence concerning this matter to:

EMIDIO J. GERMINO

(Contact Person)

JJ TAX ACCOUNTING, LLC

(Firm/Company)

18134 SANDY POINTE DR.

(Address)

TAMPA, FL 33647

(City, State and Zip Code)

For further information concerning this matter, please call:

FLORA C. BOYLE

(Name of Contact Person)

at ( 813 971-4211

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$150.00 Filing Fees  
(\$25 for Conversion  
& \$125 for Articles  
of Organization)

☒ \$155.00 Filing Fees  
and Certificate of  
Status

☐ \$180.00 Filing Fees  
and Certified Copy

☐ \$185.00 Filing Fees,  
Certified Copy, and  
Certificate of Status

**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

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TALLAHASSEE, FLORIDA

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**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Limited Liability Company**

This Certificate 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.608.439, Florida Statutes.

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

PHILIPPINE ORIENTAL STORE, INC. **103-32357**

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Philippine Oriental Store

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

first organized, formed or incorporated under the laws of FLORIDA

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

on 3/20/2003

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

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

FLORIDA

4. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

PHILIPPINE ORIENTAL STORE, LLC

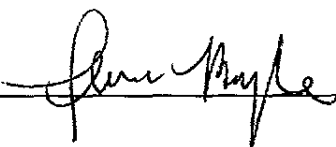
(Enter Name of Florida Limited Liability Company)

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5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_  
(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 Articles of Organization, if an effective date is listed therein.)

Signed this 8th day of February 2006.

Signature of Authorized Person: 

Printed Name: FLORA C. BOYLE Title: MANAGER

**Fees:**

|  |                    |
|--|--------------------|
| Certificate of Conversion:                 | \$25.00            |
| Fees for Florida Articles of Organization: | \$125.00           |
| Certified Copy:                            | \$30.00 (Optional) |
| Certificate of Status:                     | \$5.00 (Optional)  |

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TALLAHASSEE, FLORIDA

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

PHILIPINE ORIENTAL STORE, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

10910 N 30th Street  
TAMPA, FL 33612

### Mailing Address:

14803 TULIP DR.  
TAMPA, FL 33613

## 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:

FLORA C. BOYLE

Name

14803 Tulip Dr.

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

Tampa FL 33613

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.

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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**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:**

|                             |                             |
|-----------------------------|-----------------------------|
| <u>MGR</u>                  | <u>FLORA C. BOYLE</u>       |
|                             | <u>14803 Tulip Dr.</u>      |
|                             | <u>Tampa, FL 33613</u>      |
| <u>                    </u> | <u>                    </u> |
| <u>                    </u> | <u>                    </u> |
| <u>                    </u> | <u>                    </u> |
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| <u>                    </u> | <u>                    </u> |
| <u>                    </u> | <u>                    </u> |

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_

(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

FLORA C. BOYLE  
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.)

FLORA C. BOYLE  
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)

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SECRETARY OF STATE  
TAMPA, FLORIDA

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