

L060000030731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

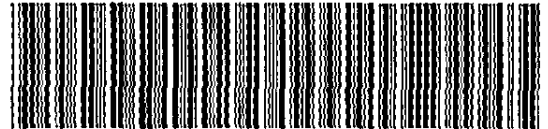
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



900065339149

02/08/06--01046--005 **52.50

03/08/06 - 01046 - 001 **132.50

FILED
2006 MAR 22 PM 4:42
TALLAHASSEE, FLORIDA

W06-7699
J. BRYAN FEB 16 2006

J. BRYAN MAR 24 2006



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 16, 2006

BRAM LELAND SCOLNICK
1145 OYSTERWOOD STREET
HOLLYWOOD, FL 33019

SUBJECT: ALTERRA DEVELOPERS GROUP, LLC
Ref. Number: W06000007699

FILED
2006 MAR 22 PM 4:42
TALLAHASSEE, FLORIDA

We have received your document for ALTERRA DEVELOPERS GROUP, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$132.50.

You completed the wrong form,

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

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 906A00011248



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2006

BRAM SCOLNICK
1145 OYSTERWOOD ST.
HOLLYWOOD, FL 33019

SUBJECT: ALTERRA DEVELOPERS INC
Ref. Number: W06000011925

FILED
2006 MAR 22 PM 4:42
TALLAHASSEE, FLORIDA

We have received your document for ALTERRA DEVELOPERS INC and check(s) totaling \$132.50. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$47.50. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The effective date of the conversion 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 listed in the Florida Articles of Organization, if any.

We received your document on March 08, 2006,

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) 245-6984.

Deborah Bruce
Document Specialist

Letter Number: 706A00017017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALTEIRA DEVELOPERS INC
(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:

BRAM SCOLNICK

(Contact Person)

ALTEIRA DEVELOPERS INC (LLC)

(Firm/Company)

1145 OXSTENWOOD ST.

(Address)

Hollywood FL 33019

(City, State and Zip Code)

For further information concerning this matter, please call:

Bram

(Name of Contact Person)

at

(305) 778 8499

(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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TALLAHASSEE, FLORIDA

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:

ALTERRA DEVELOPERS GROUP, INC. #P05000082.
(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a CORP.
(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 June 6, 2005
(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:

N/A

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

ALTERRA DEVELOPERS GROUP LLC
(Enter Name of Florida Limited Liability Company)

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 2TH day of MARCH 20 06.

Signature of Authorized Person:

Printed Name: Brian Scanlon Title: DIRECTOR

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALTEIRA DEVELOPERS GROUP, INC.

(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:

Mailing Address:

1250 E. HALLANDALE BEACH BLVD
HALLANDALE FL 33009

1145 OYSTERWOOD ST
HOLLYWOOD FL 33019

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:

BRAM SCARNICK

Name

1145 OYSTERWOOD ST

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

HOLLYWOOD

FL

33019

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)

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TALLAHASSEE, FL

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:

MGRM

MGRM

BRAM SCOLNICK
1145 OYSTERSHED ST
HOLLYWOOD FL 33019

KARIN SCOLNICK
1145 OYSTERSHED ST
HOLLYWOOD FL 33019

(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:



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.)

Bram Scolnick

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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TALLAHASSEE, FLORIDA