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| (Requestor's Name) | | |
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| (City/State/Zip/Phone #) | | |
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| PICK-UP WAIT MAIL | | |
| | | |
| (Business Entity Name) | | |
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| (Document Number) | | |
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| Certified Copies Certificates of Status | | |
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| Special Instructions to Filing Officer: | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|---|--|--|--|
| | TINE BEVENAGE JAC. Iting 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 concer | rning this matter to: | | |
| SHEAGIE SABE (Contact Person) Sunshine Bet (Firm/Company) | | | |
| | FC 33467 PRETER AREA | | |
| For further information concerning this | matter, please call: | | |
| SHERRIE SAGGRE (Name of Contact Person) | at (561) 5PP-0799 (Area Code and Daytime Telephone Number) | | |
| Enclosed is a check for the following ar | nount: | | |
| \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$\sum{1}\$ | les \$\sum \\$180.00 \text{ Filing Fees} \\ and \text{ Certified Copy} \\ Certificate \text{ 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 | | |

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: (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of ______ (Enter state, or if a non-U.S. entity, the name of the country) (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: 4. The name of the Florida Limited Liability Company as set forth in the attached **Articles of Organization:** (Enter Name of Florida Limited Liability Company)

| document is filed by the Florida D | ing, enter the effective date: | as the |
|------------------------------------|--------------------------------|------------|
| Signed this 19 day of 4 | PVIL 20 06 | |
| Signature of Authorized Person: | | |
| Printed Name: SHETULIE | Igbraine: Owner = | 18 T |
| | | FR21 PH 2: |
| Fees: | | 7 P |
| Certificate of Conversion: | \$25.00 | |

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

| (Must end with the words "Limited Liability Company, " "L.C.,") | Limited Company" or their abbreviation "LLC," or | | | |
|--|--|--|--|--|
| ARTICLE II - Address: The mailing address and street address of the Liability Company is: | he principal office of the Limited | | | |
| Principal Office Address: | Mailing Address: | | | |
| 7086 RUIGESSAT LAKE WOITH FL. | P.O. BOY 541612 Greenacies, Fl. 3345 | | | |
| ARTICLE III - Registered Agent, Regist Signature: (The Limited Liability Company cannot serve as its own individual or another business entity with an active Florida registration.) | | | | |
| The name and the Florida street address of SHERRICE | the registered agent are: | | | |
| Name 70 PG BUNGEST DINE Florida street address (P.O. Box NOT acceptable) | | | | |
| LAKE Wort | 4 FL 33467 State, and Zip | | | |
| Having been named as registered agent a | 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 \$\int \(\bigcap \) (Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(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:

| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
|--|---|
| MGR | 1086 BUIGERS DIWE LAKE WORTH FL 3346 |
| MGPZ | SHEWRIE JABEN 70 DG BUIGESS DINE LAKO WORTH FR 3340 |
| | |
| | (Use attachment if necessary) |
| ARTICLE V: Effective date, if other than the da (OPTIONAL) (If an effective date is listed, the date must be | ate of filing: |
| business days prior to or 90 days after the date | of filing.) |
| REQUIRED SIGNATURE: | 2: 24 |
| | orized representative of a member. |
| of this document constitutes an affire that the facts state | 8(3), Florida Statutes, the execution mation under the penalties of perjury d herein are true.) |
| SHERRE! Typed or printed | d name of signee |
| Filing Fees: | |
| \$125.00 Filing Fee for Articles of C | Organization and Designation |

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)