"LO600000 48736

(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: P03-141227

Office Use Only

2006 MAY -1 P 2: 57



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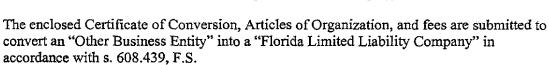
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: TAX RECOVERY, LLC

(Name of Resulting Florida Limited Company)



Please return all correspondence concerning this matter to:

MARK HAJEC	
(Contact Person)	
TAX RECOVERY, LLC	
(Firm/Company)	
429 E. SHERIDAN ST	
(Address)	
DANIA BEACH, FL 3300	4
(City, State and Zip Code)
For further information concerning this n	natter, please call:
MARK HAJEC	at (954) 921-1041
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
\$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 Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

FILED

Certificate of Conversion For

LOI

"Other Business Entity" Into

Florida Limited Liability Company

2006 HAY -1 P 2: 57

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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: TAX RECOVERY, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION
(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 11/20/03
(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 Còmpany as set forth in the attached Articles of Organization:
TAX RECOVERY, 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 26TH day of APRIL 2006	·
Signature of Authorized Person: Mark Tayee	
Printed Name: MARK HAJEC Title: PRESIDENT	-

Fees:

\$25.00

Certificate of Conversion: Fees for Florida Articles of Organization:

\$125.00

Certified Copy: Certificate of Status:

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

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LES OF ORGANIZATION FOR FLORIDA LIMITEL	LIABILITY CONTRA
ARTICLE I - Name: The name of the Limited Liability Company is:	200h 11AY -1 P 2
inc name of the Emmed Endomey Company is.	SEAR

TAX RECOVERY, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or LORIDA "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:
429 E. SHERIDAN ST	429 E. SHERIDAN ST
DANIA BEACH, FL	DANIA BEACH, FL
33004	33004

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:

MARK HAJEC
429 E. SHERIDAN ST
Florida street address (P.O. Box NOT acceptable)
DANIA BEACH FL
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

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	Name and Address: MARK HAJEC MARK HAJEC MARK HAJEC MARK HAJEC
MGRM	MARK HAJEC TALLERAN
	429 E. SHERIDAN ST 105 FF 7 5 7
	DANIA BEACH, FL 33004
	·
	(Use attachment if necessary)
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