L06000068627

(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:		
·		
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Office Use Only



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SECRETARY OF STATE
ANT AHASSEE, FLORIDA

N Ordinan JUL 1 1 2006

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Beam Direct (Name of Resulting Florida Lim	ited Company)
The enclosed Certificate of Conversion, Articles of O convert an "Other Business Entity" into a "Florida Linaccordance with s. 608.439, F.S.	
Please return all correspondence concerning this matter	er to:
MARC SAMMelmand (Contact Person) Beam Direct (Firm/Company) 30 Philmont W (Address) Alm Coast, FL 32164 (City, State and Zip Code)	
For further information concerning this matter, please	call:
MATC SAMMe Iman at (B) (Name of Contact Person) (Are	a 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) \$\square \text{\$155.00 Filing Fees} \text{and Certificate of and Certificate of Status} \$\$180.00 \text{ and Certificate of Status} \$\$180.00 and Certificate	Filing Fees Certified Copy and Certificate of Status
Registration SectionRDivision of CorporationsDClifton BuildingP	AAILING ADDRESS: Registration Section Division of Corporations C. O. Box 6327 Callahassee, 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 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 infinediately prior to the firing of this
Certificate of Conversion is: Beam Direct, INC PO4,000 10956
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
first organized, formed or incorporated under the laws of Eller to the Ring (Enter state, or if a non-U.S. entity, the name of the country)
on 7/20 04 (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:
Beam Direct. LLC
(Enter Name of Florida Limited Lightlity Company)

Page 1 of 2

			filing, enter t be prior to n				 CCI
document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)							
Signed th	is 29th	day of	June	20_	06	<u> </u>	

Signature of Authorized Person: The Some free

Printed Name: Managing Member Title: Managing Member

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)

Page 2 of 2

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, "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:	
314-A MODY Bluef 30 Philmont LA	
32130. 32164	
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:	
Mare Sammelmans	•
30 Philmint IN	1
Florida street address (P.O. Box NOT acceptable)	
Florida street address (P.O. Box NOT acceptable) Florida Street Address (P.O. Box NOT acceptable) Florida Street Address (P.O. Box NOT acceptable) PAIN Coast FL 32164	
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	
Mara Co 1	
Registered Agent's Signature (REQUIRED)	
realisated Library a pillurana (Land attemp)	

(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:	
MGRIVI — IVIANAGING MEMBER	MARC Sammelmand 30 Philmont LN Phim Coast, FL 32/64	
	(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the da (OPTIONAL) (If an effective date is listed, the date must be business days prior to or 90 days after the date REQUIRED SIGNATURE:	specific and cannot be more than five of filing.) FILE FILE	
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjument that the facts stated herein are true.)		
Typed or printed Filing Fees:	I name of signee	
rning rees:		

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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