L06000075471

(Req	uestor's Name)
(Add	ress)
(Add	lress)
(City	/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bus	siness Entity Name)
(Doc	cument Number)
Certified Copies	Certificates of Status
Special instructions to F	Filling Officer:
//	Office Use Only

Office Use Only



800077645438



ACCOUNT NO. : 072100000032

REFERENCE :

275380

7470139

ORDER DATE : July 28, 2006

ORDER TIME : 3:45 PM

ORDER NO. : 275380-005

CUSTOMER NO: 7470139

DOMESTIC AMENDMENT FILING

NAME: LEFFERT CONSULTING INC.

XX	ARTICLES	OF	CONVERSION
XX	ARTICLES	OF	ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Pamela A Washington -- EXT#

2936

EXAMINER'S INITIALS:

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.

The name of the "Other Business Entity" immediately prior to the filing of this ertificate of Conversion is: EFFERT CONSULTING INC.	()[1
(Enter Name of Other Business Entity)	⊻1.
The "Other Business Entity" is a <u>corporation</u> (Enter entity type. Example: corporation, limited partnership, sole proprietor general partnership, common law or business trust, etc.)	ship
rst organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)	
1 01/24/2005	
(Enter date "Other Business Entity" was first organized, formed or incorpora	teď)
If the jurisdiction of the "Other Business Entity" was changed, the state or country ider the laws of which it is now organized, formed or incorporated:	
The name of the Florida Limited Linbility Company as set forth in the attached rticles of Organization:	**************************************
EFFERT CONSULTING LLC	

Page 1 of 2

(Enter Name of Florida Limited Liability Company)

(The effection document effective d	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.)					
	2 %		7 /	06		

Signed this <u>LD</u> day of __

Signature of Authorized Person:

Title:

Fees:

Certificate of Conversion:

\$25.00 \$125.00

Fees for Florida Articles of Organization:

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

Page 2 of 2

ASSOCIATION OF THE PROPERTY OF THE PARTY OF

RIICLES OF ORGANIZATION FOR F	LORIDA LIMITED LIABILITY COMPARY
ARTICLE I - Name:	ORIDS
The name of the Limited Liability Company is	· · · · · · · · · · · · · · · · · · ·
LEFFERT CONSULTING LLC	
(Must end with the words "Limited Liability Company, "Limi	ited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
323 SNAPDRAGON LOOP	SAME
BRADENTON, FL 34212	
	
	Alva _{te}

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:

CORPORATION SERVI	CE COMPANY
N	Vaine
1201 HAYS STREET	
Florida stre	et address (P.O. Box NOT acceptable)
TALLAHASSEE	FL 32301
City, S	tate, 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.

> Troy Todd as its agent 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" = Mar "MGRM" = M	nager Ianaging Member	Name and Address:	
MGRM		GREGORY LEFFERT	
11.00		323 SNAPDRAGON LOOP	_
		BRADENTON, FL 34212 US	-
			_
			_
			_
			
			_
(Use attachme	nt if necessary)		
(If an effective date is to or 90 days after the	listed, the date must l	e date of filing: (OPTI be specific and cannot be more than five busines	ONAL) s days pric
	/S/ GREGORY LEF	FERT	
	Signature of a memb	er or an authorized representative of a member.	
	(In accordance with so of this document cons that the facts stated	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)	
	GREGORY LEFFE		
	T	yped or printed name of signee	
Filing F	<u>ees:</u>		
****	** * * * * * * * * * * * * * * * * * * *	To at the second Themselves	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)