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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/Ŝtate/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to f	Filing Officer:	

Office Use Only



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03/22/06--01042--021 **185.00

SECRETARY OF STATE FALLAHASSEE, FLORIDA

SEP 22 MHII

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: MANAGEMENT SERVICES LLC (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:					
DANIEZ SIRLIN (Contact Person) ANTHER REAL ESTATE PARTNERS (Firm(Company)					
155 S. MAMI AVE, PATTA (Address) (Address)					
(City, State and Zip Code) For further information concerning this matter, please call:					
Marie of Contact Person) (Name of Contact Person) (Area Code and Daytime Telephone Number) Enclosed is a check for the following amount:					
Enclosed is a check for the following amount:					
\$150.00 Filing Fees \$155.00 Filing Fees \$180.00 Filing Fees \$185.00 Filing Fees					
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314					

Tallahassee, FL 32301

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

Page 1 of 2

(Enter Name of Florida Limited Liability Company)

THER MANAGEMENT SERVICES LLC

Articles of Organization:

5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor m document is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days after the date this State; <u>AND</u> 2) must be the same as th	ıe
Signed this 19 day of Sept	20 <u>06</u> .	
Signature of Authorized Person:	2	
Printed Name: DANIEL SRUM Title	: IRES	
		FIL 06 SEP 22 SECHETARY FALLAHASSEE
Fees:		F P
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	FILED 22 AH II: 4 SEE FLORID;

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 Compar		
"L.C.,")	ny, bantus company of their acoreviation bibe	, 01
ARTICLE II - Address:		
The mailing address and street address of Liability Company is:	of the principal office of the Limited	
Principal Office Address:	Mailing Address:	
333 S.MIRMI AVE # 150	SAME	_
MIAMI, FL 33130		
ARTICLE III - Registered Agent, Resignature: (The Limited Liability Company cannot serve as its of individual or another business entity with an active Florida registration.)		ECHE IA
The name and the Florida street address	of the registered agent are:	
DANIEZ	SIRLIN	ED AH II: 42 OF STATE FLORIDA
Florida street addre	Name Name Name Note #150 SS (P.O. Box NOT acceptable)	10
MIAMI	231301	

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..

Registered seems Signature (REQUIRED)

City, State, and Zip

(CONTINUED)
Page 1 of 2

Title:	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member MANIEZ SIRLIN MGRM WETT KRINSKY MGRM	DANIEL SIRLIN 333 S. MIAMI AVE #150 MIAMI, FL 33130 SEFF KRINSKY 333 S. MIAMI AVE #150 MIAMI, FL 33130		
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	specific and cannot be more than f	\circ	
REQUIRED SIGNATURE:		AM 11: 42 F. STATE FLORIDA	
Signature of a mehiber or an auth-	orized representative of a member.		
of this document constitutes an affirm	8(3), Florida Statutes, the execution mation under the penalties of perjury ed herein are true.)		
DANIEZ SA	RLIN		
Typed or printed	d name of signee		
Filing Fees:			
\$125.00 Filing Fee for Articles of C of Registered Agent \$ 30.00 Certified Copy (Optional)			

ARTICLE IV- Manager(s) or Managing Member(s):

\$ 5.00 Certificate of Status (Optional)