# L06000115482

(Re	questor's Name)	ï
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>40</del>
(Cit	yiStateizipiPrione	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	<del>,,</del>
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	~
[/	/ /	
	7	$\mathcal{U}$
/	1 1	<b>/</b> \
//		
//	0	
//	··	·
V	Office Use Only	,

Office Use Only



200081602342

12/04/06--01012--016 \*\*180.00

RECEIVED

## LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

OF DEC. L. PH. 2: OL.

Office Use Uniy
ENT NUMBER(S), (if known):
a.
(Document #)
(Document #)
(Document #)
(Document #)
(Document #)
200 Certified Copy
Photocopy
AMENDMENTS
Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
REGISTRATION/QUALIFICATION
Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

FROM

### 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: BPSA INC.	PU401
(Enter Name of Other Business Entity	) '
2. The "Other Business Entity" is a	101
(Enter entity type. Example: corporation, limited partnersh general partnership, common law or business to	ib' sore brobuctoranib'
first organized, formed or incorporated under the laws of	ie country)
on 12-01-2004 (Enter date "Other Business Entity" was first organized, for	
(Enter date "Other Business Entity" was first organized, for	med or incorporated)
<ol> <li>If the jurisdiction of the "Other Business Entity" was changed, under the laws of which it is now organized, formed or incorporate</li> </ol>	
4. The name of the Florida Limited Liability Company as set forth Articles of Organization:  BPSA UC	in the attached

Page 1 of 2

(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 30 day of 100 2006

Signature of Authorized Person:

Printed Name: Angel Mokeno Title: Prosident

#### 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

. FROM

	(Ame:
	Limited Liability Company is:
	20XH 11/
(Marie and midles	DI DI CCO
"L.C,")	ards "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or
	Address:
ARTICLE II - A	Address: ress and street address of the principal office of the Limited
Liability Compar	
	, <u>-</u> ,
Principal Office	
9187 Fonta	Inelleau Blud #3 9187 Fontainelleau Blud #3
many FL	33/72 Mam # 33/77
ADDICT TO FEE	Registered Agent, Registered Office, & Registered Agent's
Signature: (The Limited Liability individual or another	Compuny cannot serve us its own Registered Agent. You must designate an active Florida registration.)
Signature: (The Limited Liability individual or another business entity with a	an active Florida registration.)
Signature: (The Limited Liability individual or another business entity with a	
Signature: (The Limited Liability individual or another business entity with a	e Florida street address of the registered agent are:  Angel Monen O
Signature: (The Limited Liability individual or another business entity with a	e Florida street address of the registered agent are:  Angel Monen O  Name ( ) 2 ( ) ( ) ( ) ( )
Signature: (The Limited Liability individual or another business entity with a	e Florida street address of the registered agent are:  Angel Monen O  9187 Fontainess au Blvd. #3

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

X

### ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior

**REQUIRED SIGNATURE:** 

to or 90 days after the date of filing.)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

#### Filing Fees:

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

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