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| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | Idress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument 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
SECRETARY OF STATE

DU DATE

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: KID'S RESORT, 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: |
| EVELYN RIVERA, EA |
| (Contact Person) ACCOUNTING CENTER FOR SMALL BUSINESS LLC |
| (Firm/Company) |
| 5701 DOGWOOD DR |
| (Address) |
| ORLANDO, FL 32807 |
| (City, State and Zip Code) |
| |
| For further information concerning this matter, please call: |
| EVELYN RIVERA, EA at (407) 281-0227 |
| (Name of Contact Person) (Area Code and Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$150.00 Filing Fees \$\sum \\$155.00 Filing Fees and Certified Copy \$185.00 Filing Fees \$\sum \\$25 for Conversion & and Certificate of Status of Organization)\$\$\$ \$185.00 Filing Fees \$\sum \\$25 for Articles & Status & Certificate of Status & \sum \\$25 for Articles & Status & \sum \\$27 for Articles & \sum \\$27 for Ar |
| STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

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.

| | siness Entity" immediately prior to the filing of this |
|--|--|
| Certificate of Conversion is: | KID'S RESORT, INC \$\int \(\frac{103}{2} \) |
| (Ente | er Name of Other Business Entity) |
| | corporation, limited partnership, sole proprietorship, ership, common law or business trust, etc.) |
| first organized, formed or inco (Enter state, or i | rporated under the laws of FLORIDA if a non-U.S. entity, the name of the country) |
| on APRIL 7, 2003 (Enter date "Other Busines | ss Entity" was first organized, formed or incorporated) |
| 3. If the jurisdiction of the "Ot | ther Business Entity" was changed, the state or country ow organized, formed or incorporated: |
| 4. The name of the Florida Lin Articles of Organization: | nited Liability Company as set forth in the attached |
| K | (ID'S RESORT, LLC. |
| (Enter Nam | e of Florida Limited Liability Company) ω |

Page 1 of 2

5. If not effective on the date of filing, enter the effective date: JANUARY 1, 2007 (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 12 day of DECEMBER 20 06

Signature of Authorized Person: Condulario

Printed Name: ELSA CANDELARIO Title: PRESIDENT

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

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SECRETARY OF STATE
TALLAHASSES

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KID'S RESORT, LLC

(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: |
|---------------------------|--------------------|
| 9397 TREVARTHON RD | 9397 TREVARTHON RD |
| ORLANDO, FL 32817 | ORLANDO, FL 32817 |

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:

ELSA CANDELARIO 9397 TREVARTHON RD Florida street address (P.O. Box NOT acceptable) ORLANDO, FL 32817_{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 Chapter 608, F.S.

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:

| | Name and Address: |
|--|---|
| "MGR" = Manager "MGRM" = Managing Memb | er |
| MGRM | ELSA CANDELARIO |
| | 9397 TREVARTHON RD |
| | ORLANDO, FL 32817 |
| 110011 | |
| MGRM | JUAN CANDELARIO |
| | 9397 TREVARTHON RD |
| | ORLANDO, FL 32817 |
| | |
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| | |
| | (Use attachment if necessary) |
| s days prior to or 90 days afte | e must be specific and cannot be more than five er the date of filing.) |
| DECLIDED CICNATUDE. | |
| REQUIRED SIGNATURE: | |
| | |
| , Clan | All accio r an authorized representative of a member. |
| Signature of a member of (In accordance with section of this document constituted) | an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury facts stated herein are true.) |
| Signature of a member of (In accordance with section of this document constitute that the | an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury facts stated herein are true. |
| Signature of a member of (In accordance with section of this document constitute that the ELSA | an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury facts stated herein are true.) |
| Signature of a member of (In accordance with section of this document constitute that the ELSA | r an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury facts stated herein are true.) CANDELARIO or printed name of signee |
| Signature of a member of (In accordance with section of this document constitute that the ELSA | r an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjuryo facts stated herein are true.) CANDELARIO or printed name of signee |
| Signature of a member of (In accordance with section of this document constitute that the ELSA (Typed Filing Fees: \$125.00 Filing Fee for Ar | r an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjurys facts stated herein are true.) CANDELARIO or printed name of signee ticles of Organization and Designation 1 |
| Signature of a member of (In accordance with section of this document constitute that the ELSA (Typed Filing Fees: | r an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjuryo facts stated herein are true.) CANDELARIO or printed name of signee ticles of Organization and Designation sent |