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Special Instructions to F	-	
Pablo Alvarez AUTHO CORREC eff dak DATE 12/26/06		
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SECRETARY OF STATE
AND AHASSEE, FLORIDA

M Author DEC O Com

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ		/ealth Management LLC
	(Name of	Resulting Florida Limited Company)
conve		sion, Articles of Organization, and fees are submitted to into a "Florida Limited Liability Company" in
Please	e return all correspondence co	ncerning this matter to:
PAE	BLO ALVAREZ	
	(Contact Perso	n)
Firs	t American Wealth Ma	nagement LLC
	(Firm/Compar	y)
164	52 SW 95 LN	
	(Address)	
MIA	MI, FL 33196	
	(City, State and Zi	p Code)
	, ,	,
For fu	urther information concerning	this matter, please call:
PAE	BLO ALVAREZ	at (786) 326-5758
-	(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclo	sed is a check for the following	ng amount:
(\$25 fc & \$12	0.00 Filing Fees and Certificate Status	
STRI	EET ADDRESS:	MAILING ADDRESS:
Regis	tration Section	Registration Section
Division of Corporations		Division of Corporations
Clifton Building		P. O. Box 6327
	Executive Center Circle hassee, FL 32301	Tallahassee, FL 32314

Certificate of Conversion For "Other Business Entity" Into Florida Limited Liability Company

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: First American Wealth Management Corp. P05-66757				
(Enter Name of Other Business Entity) 2. The "Other Business Entity" is a COrporation (Enter entity type. Example: corporation, limited partnership, sole proprietorshi general partnership, common law or business trust, etc.)				
(Enter state, or if a non-U.S. entity, the name of the country)				
on May 4, 2005 (Enter date "Other Business Entity" was first organized, formed or incorporated)				
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:				
First American Wealth Management LLC				
(Enter Name of Florida Limited Liability Company)				

(The education of the control of the	ot effective on the date of filing, enter the effective date: 1) cannot be prior to nor motent is filed by the Florida Department of Sive date listed in the attached Articles of Otherein.)	ore than 90 days after the date this State; <u>AND</u> 2) must be the same as the
Signed	this 6 day of December	20_06
	ure of Authorized Person: Name: PABLO ALVAREZ Title:	President
Fees:	•	
	Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

First American Wealth Management 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 Ac	<u>Idress:</u> <u>M</u>	Sailing Address:		
16452 SW 95 Lane				
Miami, FL 33196				
Signature: (The Limited Liability Conindividual or another business entity with an ac	gistered Agent, Registered Of npany cannot serve as its own Registered tive Florida registration.) lorida street address of the regis	Agent. You must designate an SECNE	nt 06 DEC 22	ית: ית:
	Alejandro Alvarez	SSEE.	22 PM	FILED
·	16452 SW 95 Lane	FLOR	1:56	
•	Florida street address (P.O. Box	x <u>NOT</u> acceptable)	i o	
	Miami, FL 33196 $_{ m Fl}$	L .		
•	City, State, ar	nd 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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	•
MGR	Alejandro Alvarez
	16452 SW 95 Lane
	Miami, FL 33196
	-
	
	Name of the control o

	(Use attachment if necessary)
ADTICLE V. Effective data if other th	on the data of filings
ARTICLE V: Effective date, if other th (OPTIONAL)	an the date of ming:
`	must be specific and cannot be more than five
business days prior to or 90 days after	•
	:
REQUIRED SIGNATURE:	TASE OF
Signature of a member of	an authorized representative of a member.
<u> </u>	SER N L
(In accordance with section	1 608.408(3), Florida Statutes, the execution
	an armination under the penalties of penalty
	acts stated herein are true.)
Alejandro Alvarez	<u> </u>
Typed o	or printed name of signee

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)