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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

COVER LETTER

Division of Corporations	•	
SUBJECT: Chalbert Investment, L.	L.C.	
	orida Limited Company)	
The enclosed Certificate of Conversion, Articonvert an "Other Business Entity" into a "Flaccordance with s. 608.439, F.S.	cles of Organization, and fees are submitted to lorida Limited Liability Company" in	
Please return all correspondence concerning	this matter to:	
Jose C. Marrero, Esq.		
(Contact Person)		<u>, 4</u>
Jose C. Marrero & Associates, P	.A	or Hist
(Firm/Company)		
1820 N. Corporate Lakes Blvd., S	Suite 105	07 MAR 21 AH 11: 13
(Address)		
Weston, FL 33326		E
(City, State and Zip Code)		
		ပ်
For further information concerning this matte	er, please call:	
	at (954) 217-1907	
(Name of Contact Person)	(Area Code and Daytime Telephone Number)	
Enclosed is a check for the following amount	:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$180.00 Filing Fees, and Certified Copy Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section Registration Section		
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314	
Tallahassee, FL 32301	i andnassee, FL 34314	

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

Company in accordance with s.608.439, Florida Statutes.

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: Chalbert Investment Corp. #P03000109522 (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country) on_10/06/03 (Enter date "Other Business Entity" was first organized, formed or incorporated) 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated: N/A 4. The name of the Florida Limited Liability Company as set forth in the attached **Articles of Organization:** Chalbert Investment, L.L.C.

Page 1 of 2

(Enter Name of Florida Limited Liability Company)

(The effective document is fi	led by the Florida Departisted in the attached Arti	to nor mo tment of S	fective date: ore than 90 days after the date this State; <u>AND</u> 2) must be the same as the	bo
Signed this 27	day of Februar	у		
Signature of Au	athorized Person:	W/kg	W. low	
Printed Name:	Silvia Radulescu	Title:	President	

SECRETARY OF STATE SECRETARY OF CORPORATIONS
07 MAR 21 AH 11: 13

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	TICI	R. I	_ N	ame

The name of the Limited Liability Company is:

Chalbert Investment, L.L.C.

(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:

1820 N. Corporate Lakes Blvd., Suite 105

Weston, FL 33326

Weston, FL 33326

1697 Passion Vine Circle

Weston, FL 33326

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:

Jose C. Marrero, Esq.

1820 N. Corporate Lakes Blvd., Suite 105

Florida street address (P.O. Box NOT acceptable)

Weston _{FL} 33326

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, P.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

DIVISION OF CORPORATIONS
DIVISION OF CORPORATIONS

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	
MGRM	Silvia Radulescu
***************************************	1697 Passion Vine Circle
	Weston, FL 33326
MGRM	
IVIGHIVI	Alberto Chalbaud
	1697 Passion Vine Circle
	Weston, FL 33326
	0 20
	1 550
	2
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the da	
(OPTIONAL)	ne of fining.
(If an effective date is listed, the date must be	specific and cannot be more than five
business days prior to or 90 days after the date	
	•
REQUIRED SIGNATURE:	2
Silfer lefde &	
Signature of a member of an autho	orized representative of a member.
(In accordance with section 608.408	2(3) Florida Statutes the execution
of this document constitutes an affirm	
that the facts state	
Silvia Radulescu	
Typed 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)