\$.

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Conv.		

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corpora	itions		
SUBJECT: Ex	oress F	inancial G Florida Limited Cou	Group 5
(Name of Resulting	g r ionda Liinted Coi	npary)
The enclosed Certificate of convert an "Other Business accordance with s. 608.439	Entity" into a		ation, and fees are submitted t Liability Company" in
Please return all correspond		•	
James (Cor Express (Firm \$120 SU Cape Cora (City, Sta	tact Person)	Peill SR	2
Express	Financi	al Group	r
(Firm	n/Company)	,	•
<u>3120 SU</u>	U 18th	Aue	
(Address)		
Cape Cora	y FL	33914	
(City, Str	te and Zip Code)		
For further information con	-	• •	
James on	eill SR	_at (239	8 23 - 9827 and Daytime Telephone Number)
(Name of Contact Person	on)	(Area Code	and Daytime Telephone Number)
Enclosed is a check for the	following amo	unt:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	ertificate of	\$180.00 Filing and Certified Cop	Fees \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:		МАПЛ	NG ADDRESS:
Registration Section			ation Section
Division of Corporations Division of Corporations			n of Corporations
Clifton Building			ox 6327
2661 Executive Center Circ Tallahassee, FL 32301	le	Tallaha	ssee, FL 32314

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: Express Financial Group Inc. (Enter Name of Other Business Entity) Po4-49682		
(Enter Name of Other Business Entity) Dul-49682		
2. The "Other Business Entity" is a <u>Cocporation</u>		
(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 3/20/04		
on 3/20/04 (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:		
NA		
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:		
Express Financial Group LLC (Enter Name of Florida Limited Liability Company)		
(Enter Name of Florida Limited Liability Company)		

Page 1 of 2

(The effective document is	ve date: 1) cr filed by the e listed in th	late of filing, enter the eff annot be prior to nor mo Florida Department of S e attached Articles of O	re than 90 days State; <u>AND</u> 2) mi	after the date this ust be the same as the
	^	M 1	nd	

Signed this 20 day of March 2007.

Signature of Authorized Person:

Printed Name: James L Onaill 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Express Financial Group, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or

Mailing Address:

The mailing address and street address of the principal office of the Limited

ARTICLE 1 - Name:

ARTICLE II - Address:

Principal Office Address:

Liability Company is:

The name of the Limited Liability Company is:

1 Tilletpat Office Address.	Maning Address.
5120 SW 18th Ave Cape Coral FL 339/4	5/20 SW 18th Ave Cape Coral FL 3 3914
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Regist individual or another business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
James L. O'Nei Name 5/20 SW 18 B Florida street address (P.O. Cape Coral City, State	FL 33914
Having been named as registered agent and to above stated limited liability company at the planereby accept the appointment as registered capacity. I further agree to comply with the prothe proper and complete performance of my deaccept the obligations of my position as regional completer 608 for the completer contact the contac	ace designated in this certificate, I I agent and agree to act in this ovisions of all statutes relating to uties, and I am familiar with and stered agent as provided for in

(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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	James L. O'neill, SR
	5120 SW 18th Ave Cape Coral FL 33914
CO-MGR	Patricia A. O'neill
	5120 SW 18th Ave Cape Coral FL 33914
MGRM	Beborah Ahlgrim 3026 SW ZGA AUE
	Cape Coral FL 339
MGRM	James Loneill Jr. 1141 5W. 44 ST.
	(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March 10, 2007. (OPTIONAL)

(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 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.)

James L O'Neill Se 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)

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