# 10700045928

(Re	equestor's Name)	
(Ac	ldress)	
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		•
(Ci	ty/State/Zip/Phone	<del>=</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
	•	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	-	
		:

Office Use Only



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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Pioneer Designs 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:
Jorge Marie Sotelo (Contact Person)  Pioweer Designs (Firm/Company)  5420 NW 107 Ave Suite 307.  (Address)  Miami, FL 33178 (City, State and Zip Code)  For further information concerning this matter, please call:  Jorge Marie Sotelo at 786 206-5259  (Name of Contact Person)  (Area Code and Daytime Telephone Number)  Enclosed is a check for the following amount:
\$\bigsiz \\$150.00 \text{ Filing Fees}  \\$155.00 \text{ Filing Fees}  \\$180.00 \text{ Filing Fees},  \\$25 \text{ for Conversion}  \text{and Certificate of}  \text{and Certified Copy}  \text{Certified Copy, and}  \text{Certificate of Status}  \text{Organization}
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

## **Certificate of Conversion**

For

#### "Other Business Entity"

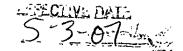
Into

#### 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:  Pioner Designs Inc  (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a(Orocation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of \frac{7\o1\delta}{2} (Enter state, or if a non-U.S. entity, the name of the country)
on <u>Narch 4 2004</u> . (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:
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Pioneer Designs LLC BETT E
(Enter Name of Florida Limited Liability Company)

Page 1 of 2



5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor modocument is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days after th State; <u>AND</u> 2) must be tl	e date this he same as the
Signed this 26 day of April	20 <u>07</u> .	
Signature of Authorized Person: jorge Printed Name: brase Mario Solelo Title		
J		•
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)	2001 APR 30 PH 1: 44 SECRETARY OF STATE TALLAHASSEE, FLORID
Page 2 of 2	2	Su t

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Pioneer Designs	uc
(Must end with the words "Limited Liability Company, "I "L.C.,")	.imited Company" or their abbreviation "LLC," or
ARTICLE II - Address:	
The mailing address and street address of th	e principal office of the Limited
Liability Company is:	
Principal Office Address:	Mailing Address:
5420 DW 107 Ave Svite 307. Miami, FL 33178	5420 NW 107 Ave \$vite SO7.
Migmi, FL 33178	Miami, #L 33178
	in the same of the
5420 NW 107 Ave Florida street address (1	the registered agent are:  ASSTERIOR Solve to So
Florida street address (I	P.O. Box NOT acceptable)
Florida street address (I	suite 307.

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

NACD! - Manager	Name and Address:
'MGR" = Manager 'MGRM" = Managing Member	
MGR	Jorge Mario Sotels
	5420 NW 107 Ave #307.
	Mani, FL 33 175
116FA	Daniel Acero
	5420 NW 102 Ame #307.
	Migni, FL 33178.
716 RM	Sofia Ojeda.
	5420 NW 107 AVE #317.
	Mismi, FL 33198:
	(Use attachment if necessary):
NAL) fective date is listed, the date n days prior to or 90 days after t  REQUIRED SIGNATURE:	n the date of filing: Nay 3, 2003.
NAL) fective date is listed, the date n days prior to or 90 days after t  REQUIRED SIGNATURE:  Signature of a member or a	n the date of filing: Nay 3, 2002.  The date of filing: Nay 3, 2002.  The date of filing.)  The date of filing.
NAL) fective date is listed, the date me days prior to or 90 days after to respect to the section of this document constitutes as fective days.	nust be specific and cannot be more than five he date of filing.)  ACT TO STATE TO S
NAL) fective date is listed, the date me days prior to or 90 days after to responsible to the responsible to	n the date of filing: Nay 3, 2002.  The date of filing: Nay 3, 2002.  The date of filing.  Th
NAL) fective date is listed, the date m days prior to or 90 days after t  REQUIRED SIGNATURE:  Signature of a member or a  (In accordance with section of this document constitutes a that the factories.)	nust be specific and cannot be more than five the date of filing.)  nust be specific and cannot be more than five the date of filing.)  nust be specific and cannot be more than five the date of filing.)  nust be specific and cannot be more than five the date of filing.)  1000.  100

\$ 5.00 Certificate of Status (Optional)