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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to I		
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Office Use Only



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O7 JUN 18 PM 12: 38
SECRETARY OF STATE
AND ARROSS FLORID

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: MOORE Studio L	Florida Limited Company)	
(Name of Resulting	rionda Limited Company)	
The enclosed Certificate of Conversion, Arconvert an "Other Business Entity" into a "accordance with s. 608.439, F.S.	rticles of Organization, and fees are submitted to 'Florida Limited Liability Company' in	
Please return all correspondence concernin	ng this matter to:	
GARY L. MODRE (Contact Person)	. 7. 0	
MOORE Studio, L (Firm/Company)	O7 JUN 18 PH 12: 30 SECKETARY OF STATE ALLAHASSEE, FLORID	
box 10772 (Address)	ASSEE. P	•
MiAMi, Fl 33 (City, State and Zip Code)	FLORIE FLORIE	
(City, State and Exp Code)	A	
For further information concerning this ma		
CARY L. MOORE (Name of Contact Person)	at (305) 323-6923 (Area Code and Daytime Telephone Number)	
Enclosed is a check for the following amou	unt:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy Certificate of Status	
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.

	siness Entity" immediately prior to the filing of this	
Certificate of Conversion is:	mover Studio, Inc. POSODO	117835
(Ente	r Name of Other Business Entity)	• •
(Enter entity type. Example	is a Or Orafion e: corporation, limited partnership, sole proprietorship, ership, common law or business trust, etc.)	
first organized, formed or incor (Enter state, or i	porated under the laws of <u>Florida</u> f a non-U.S. entity, the name of the country)	
on MAY 27, 200 (Enter date "Other Busines	ss Entity" was first organized, formed or incorporated)	
	her Business Entity" was changed, the state or country was organized, formed or incorporated:	O7 JUN
4. The name of the Florida Lim Articles of Organization:	nited Liability Company as set forth in the attached	8
MOORE "	Studio, L. L. C.	E D PM 12: 38
(Enter Name	e of Florida Limited Liability Company)	33

5. If not effective on the date of filing, enter the effective date: 1) cannot be prior to nor medocument is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days after the dat State; <u>AND</u> 2) must be the sa	me as the
Signed this 12 th day of JUNE	20_07	
Signature of Authorized Person: GARY L. MOORE Title	wit	-
Printed Name: (SARY L. MOORE Title	: <u>Præsident</u>	
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)	O7 JUN 18 PH 12: 38 SECRETAGE UP STATE TALLAHASSEE, FLORID

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MORE Studio, 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:
2441-1 EAST ARA CON BIND DOX 10772 SIN RISE, FL MIAM! FI 33313 33101
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate and individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
BARY L. MOORE BAR 33
Name 2441-1 EAST APAgun blud Florida street address (P.O. Box NOT acceptable)
Smrist FL 33313 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

(CONTINUED)
Page 1 of 2

Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

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 "MGRM" = Managing Member	Name and Addr	ess:	
	(Use attachment	if necessary)	
ARTICLE V: Effective date, if other than the (OPTIONAL) (If an effective date is listed, the date must l	-	TASS O	T
business days prior to or 90 days after the da REQUIRED SIGNATURE:		to more than the property of t	-
Signature of a member or an aut	Ethorized representati	FLORIA :30 ive of a member.	
(In accordance with section 608.4 of this document constitutes an aff	- 108(3), Florida Statute	es, the execution	
GARY L. MO Typed or print	OPE ted name of signee	<u> </u>	
Filling Food			

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)