

LOT 000123748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

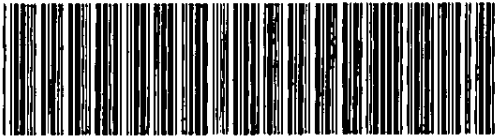
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
Conv.

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SECRETARY  
DIVISION OF  
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*Reject  
Inactive*

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COVER LETTER — CORRECTION.

TO: Registration Section  
Division of Corporations

SUBJECT: NOVASTAR INVESTMENTS & TRADING, LLC.  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SUSANA IRIBARREN (PRESIDENT)  
(Name of Person)

NOVASTAR INVESTMENTS & TRADING, INC  
(Firm/Company)

5041 CELLO WOOD LANE  
(Address)

WESLEY CHAPEL, FL 33543  
(City/State and Zip Code)

For further information concerning this matter, please call:

SUSANA IRIBARREN at ( 813 ) 469-8721  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: Amount already paid

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)     \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street/Courier Address  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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:

NOVASTAR INVESTMENTS & TRADING, INC  
 (Enter Name of Other Business Entity)

2. The "Other Business Entity" is a \_\_\_\_\_  
 (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 12-13-2006  
 (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**:

NOVASTAR INVESTMENTS & TRADING, LLC  
 (Enter Name of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_.  
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

Signed this 20th day of December 20 07.

Signature of Authorized Person: \_\_\_\_\_

Printed Name: SUSANA IRIBARREN 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)

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

NOVASTAR INVESTMENTS & TRADING, LLC:  
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

**Mailing Address:**

5041 CELLO WOOD LANE

5041 CELLO WOOD LANE

WESLEY CHAPEL, FL 33543

WESLEY CHAPEL, FL 33543

**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:

SUSANA IRIBARREN  
Name

5041 CELLO WOOD LANE  
Florida street address (P.O. Box **NOT** acceptable)

WESLEY CHAPEL FL 33543  
City, State, and Zip

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SECRETARY  
DIVISION OF

*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)

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

SUSANA IRIBARREN  
5041 CELLO WOOD LANE  
WESLEY CHAPEL, FL 33543

\_\_\_\_\_

\_\_\_\_\_

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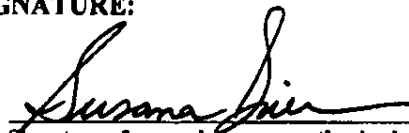
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\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 12-3-2007 (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.)

**REQUIRED SIGNATURE:**



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.)

SUSANA IRIBARREN

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)