# LDXDDD20203

|                     | (Requestor's Name)       |
|---------------------|--------------------------|
|                     | (Address)                |
| •                   | (Address)                |
|                     | (City/State/Zip/Phone #) |
| PICK                | -UP . WAIT MAIL .        |
|                     | (Business Entity Name)   |
|                     | (Document Number)        |
| Certified Copies _  | Certificates of Status   |
| Special Instruction | ons to Filing Officer:   |

L. SELLERS

FEB 2 6 2008

**EXAMINER** 

Office Use Only



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02/22/08--01023--013 \*\*185.00

SEGRETARY OF STATE ALLAHASSEE, FLORIDA

08 FEB 22 PM 3: 5

# COVER LETTER

| TO: Registration Section Division of Corporations                                                                                |                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| SUBJECT: HSB TELE                                                                                                                | COM LLC                                                                                    |
| (Name of Resultin                                                                                                                | g Florida Limited Company)                                                                 |
| The enclosed Certificate of Conversion, A convert an "Other Business Entity" into a accordance with s. 608.439, F.S.             | Articles of Organization, and fees are submitted to "Florida Limited Liability Company" in |
| Please return all correspondence concerni                                                                                        | ng this matter to:                                                                         |
| Yogananda Nunez                                                                                                                  |                                                                                            |
| (Contact Person)                                                                                                                 | · · · · · · · · · · · · · · · · · · ·                                                      |
| HSB TELECOM LLC                                                                                                                  |                                                                                            |
| (Firm/Company)                                                                                                                   |                                                                                            |
| 5920 Smokey Quartz CT.                                                                                                           |                                                                                            |
| (Address)                                                                                                                        |                                                                                            |
| Henderson, NV 89011                                                                                                              |                                                                                            |
| (City, State and Zip Code)                                                                                                       | <u> </u>                                                                                   |
| For further information concerning this m                                                                                        | atter, please call:                                                                        |
|                                                                                                                                  | at ( )                                                                                     |
| (Name of Contact Person)                                                                                                         | (Area Code and Daytime Telephone Number)                                                   |
| Enclosed is a check for the following amo                                                                                        | ount:                                                                                      |
| \$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:                                                                                                                  | MAILING ADDRESS:                                                                           |
| Registration Section                                                                                                             | Registration Section                                                                       |
| Division of Corporations                                                                                                         | Division of Corporations                                                                   |
| Clifton Building                                                                                                                 | P. O. Box 6327                                                                             |
| 2661 Executive Center Circle                                                                                                     | Tallahassee, FL 32314                                                                      |
| 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 5:608:439, Florida Statutes:

| 1. The name of the "Other Business Entity" immediately prior to the filing of this                                                                                                                    |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Certificate of Conversion is: Hilario Baldo                                                                                                                                                           |  |  |
| (Enter Name of Other Business Entity)                                                                                                                                                                 |  |  |
| 2. The "Other Business Entity" is a Sole Proprietorship  (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 January 01,2007 (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:                                                                                           |  |  |
| HSB TELECOM LLC                                                                                                                                                                                       |  |  |
| (Enter Name of Florida Limited Liability Company)                                                                                                                                                     |  |  |

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, ... *f*\*

5. If not effective on the date of filing, enter the effective date: 22 February 2008 (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 18th day of February 20 08

Signature of Authorized Person: Jogannila O. Nieng

Printed Name: Yogananda Nunez Title: Manager

#### 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)

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

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

## **HSB TELECOM LLC**

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "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:**

1516 E. Tropicana Ave. Ste. 136

Las Vegas, NV 89119

5920 Smokey Quartz Court

Henderson, NV 89011

# 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:

### **UTAQ LLC**

# 1946 Apopka Drive

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

Middleburg,32068 FL

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, F.S..

Registered Agent's Signature (REQUIRED

(CONTINUED)
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#### ARTICLE IV- Manager(s) or Managing Member(s):

| MGR"                             | Hilario Baldo                                   |
|----------------------------------|-------------------------------------------------|
|                                  | 4986 Sedimentary Street<br>Las Vēgas , NV 89122 |
| MGR"                             | Yogananda Nunez                                 |
|                                  | 5920 Smokey Quartz                              |
|                                  | Henderson, NV 89011                             |
|                                  |                                                 |
|                                  | (Use attachment if necessary)                   |
|                                  | •                                               |
| EV: Effective date, if other tha | in the date of filing: 22 February 2008         |

ARTIC (OPTIO

(If an e busines

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.)

## Yögañanda Nuñez

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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