# LU8000039004

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL .
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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04/18/08--01010--008 \*\*155.00

FILED RECEIVED

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

ON APR 18 MH 10: 36

B. KOHR
APR 1 8 2008
EXAMINER

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## Charter Number Only

201

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4/17		Mae	21a A	<b>_</b> .
Peter Requestors Name 21.570.5	<u>R.</u>	Abesada and Street	P.A.	-
	FI State	33135	Phone	···

ON NEW OF STATE

# CORPORATION(S) NAME

Acknowledgment

W.P. Varifier

Colossus	Mortgage & Lo	an Enterprises LLC
	.)	
		·
( ) Profit		
NonProfit	( ) Amendment	( ) Merger
( ) Foreign	( ) Dissolution	( ) Mark
( ) Limited Partnership	( ) Annual Report	Tother (ONVOISION)
( ) Reinstatement	( ) Reservation	( ) Change of Registered Agent
) Certified Copy	( ) Photo Copies	Certificate Under Seal
( ) Gall When Ready	( ) Call If Problem	( ) After 4:30
Walk In ( )	Will Wait	lick Up ( ) Mall Out
Neme Availability		
Document	<del></del> i	
Examiner		
lpdeter		
/arifiar		

#### **Certificate of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> 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:
(Enter Name of Other Business Entity)
A '
2. The "Other Business Entity" is a <u>Corboration</u> 817.000/17 262
(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 $\frac{10/25/2007}{}$ .
(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:
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Colossus Mortgage & Loan Enterprises LLC.
(Enter Name of Florida Limited Liability Company)

Page 1 of 2

# **COVER LETTER**

TO: Registration S				
Division of C	orporations			
SUBJECT:	(Name of Resulting	TGCGE LOC g Florida Limited Company	in Enterprises L	
	siness Entity" into a	rticles of Organization, "Florida Limited Liabil	and fees are submitted to ity Company" in	
Please return all corre	espondence concernir	ng this matter to:		
MARIA	(Contact Person)			
3676 Su	(Firm/Company)			
<u>3676 Su</u>	(Address)	<del> </del>		
Miami	Ely, State and Zip Code)	5		
For further information	on concerning this ma	atter, please call:		
MARIC (Name of Conta	ct Person)		88-3921 aytime Telephone Number)	
Enclosed is a check f	or the following amo	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	\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS	S:	MAILING A		
Registration Section		_	Registration Section	
Division of Corporati	ions	Division of C		
Clifton Building 2661 Executive Cent	C:1-	P. O. Box 63		
ZOOT EXECUTIVE CENT	er Circie	Tallahassee.	rt, 52314	

Tallahassee, FL 32301

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 13 day of Maych 20 0 8.
Signature of Authorized Person: Ravia R. Ahladi
Printed Name: MARIA Abesadate: P/D
Fees:
Certificate of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional)

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

ARTICLE I - Name:  The name of the Limited Liability Company is:  \[ \text{\interprec} \log \text{\interprec} \int
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
3676 54) 2nd St  Miami Fl 33135  ARTICLE III - Registered Agent, Registered Office, & Registered Agent's ST
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:  MARIA M. Abesada  Name  3676 Sh 2nd St  Florida street address (P.O. Box NOT acceptable)
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 (REOUIRED)

(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	
MGRM	Maria M. Abesada 3676 SN 29 Atui
	1411dm1, 11. 33135
	(Use attachment if necessary)
DOWN DATE DOWN IN THE SECOND OF THE SECOND O	1. 000
RTICLE V: Effective date, if other than the	(OPTIONAL)
The effective date: 1) cannot be prior to no becoment is filed by the Florida Department be effective date listed in the attached Cate is listed therein.)	or more than 90 days after the date this nt of State; AND 2) must be the same as
REQUIRED, SIGNATURE:	
Maria M.	Allerada
Signature of a member or an au	fhorized representative of a member.
of this document constitutes an aff that the facts sta	108(3), Florida Statutes, the execution firmation under the penalties of perjury atted herein are true.)
Maria M. A	besada
Typed or print	ted 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)