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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE

08 APR 30 AM 10: 54

M. Thomas MAY = 1 2000

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LUFA SERVICES TNC. (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:
TSIS TSABEL (Contact Person) H TTAX TNUESTMENT CONP. (Firm/Company) 7758 NW 44TH ST (Address)
ITAX Investment Conp. 語 33 (Firm/Company)
7758 NW 44TH ST (Address)
SUNRISE FL 3335/ (City, State and Zip Code)
For further information concerning this matter, please call: 954-6079975
(Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\bigsize \text{\$\subseteq} \frac{\subseteq}{\subseteq} \f
STREET ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301



April 22, 2008

ISIS ISABEL 7758 NW 44TH ST. SUNRISE, FL 33351

SUBJECT: LUFA SERVICES INC Ref. Number: W08000020303

We have received your document for LUFA SERVICES INC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

Please return your document, along with a copy of this letter, within 60 days our filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 908A00024141

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	00)	7
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: \[\(\subseteq \ \mathcal{UFA} \subseteq \ \mathcal{E} \ \mathcal{UCES} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess} \mathcal{Incess}	· / \)	
(Enter Name of Other Business Entity)	700,	
2. The "Other Business Entity" is a COILPOILATION	<u>Z</u> .	
(Enter entity type. Example: corporation, limited partnership, sole proprietorsl general partnership, common law or business trust, etc.)	hip,	
first organized, formed or incorporated under the laws of FLO121DA (Enter state, or if a non-U.S. entity, the name of the country)	08 AF	
on 10-17-2006 (Enter date "Other Business Entity" was first organized, formed or incorporate	OB APR 30 AM 10: 54	FILED
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:	OF STATE	-
FLORIDA		
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:		
LUFA SERVICES 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 document is filed by the Florida Department of State; AND 2) must be the same effective date listed in the attached Articles of Organization, if an effective date listed therein.)	e as the
Signed this	
Signature of Authorized Person: Printed Name: Aucelo P Bakkee Title: Tesidente.	OB APR 30 AM IO: 54 SECHETARY OF STATE VALLACIANSEE. FLORI
Fees:	Öw -

\$25.00 \$125.00

Fees for Florida Articles of Organization: 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:
LUFA SERVICES 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:
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: April 50 Ho CLy wood FL 33023
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, E.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 MG(C)	Name and Address:
	MARCELO BALCARGE 5835 WASHINGTON ST HOLLYWOOD FL. 33023
	D8 APR 30 FILE
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the (The effective date: 1) cannot be prior to a document is filed by the Florida Departme the effective date listed in the attached C date is listed therein.)	odate of filing: (OPTIONAL) nor more than 90 days after the date this nt of State; AND 2) must be the same as
REQUIRED SIGNATURE:	
Signature of a member or an aut	thorized representative of a member.
(In accordance with section 608.4 of this document constitutes an aff	408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.)
MARCE	ted name of signee
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)