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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE TALL AHASSEE, FLORIDA

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### **COVER LETTER**

Division of C					
SUBJECT: Weston Center, LLC (Name of Resulting Florida Limited Company)					
	ate of Conversion, Ar siness Entity" into a "	ticles of Organia	zation,	and fees are submitted	l to
Please return all corre	espondence concerning	g this matter to:			
Michelle Barron	(2 )		_		
	(Contact Person)				
Law Offices of Frye & A			_		
	(Firm/Company)				
20900 West Dixie High	way		_		
	(Address)				
A					₽K
Aventura, FL 33180	City, State and Zip Code)		-	•	計
	only, Blace and Esp cour,			į	SE
For further information	on concerning this ma	tter, please call:		}	H H H S
Michelle Barron		at (_305	) 931-	3200	ŽΞ
(Name of Conta	ct Person)		and Da	ytime Telephone Number	ξm
Enclosed is a check f	or the following amou	int:			
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Co		\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS	S:	MAIL	ING A	ADDRESS:	
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
Clifton Building		P. O. Box 6327			
2661 Executive Cent	Tallah	assee, I	FL 32314		
Tallahassee, FL 323	U I				

### **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: P97 000 8751	2
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation	nronriotorshin
(Enter entity type. Example: corporation, limited partnership, sole general partnership, common law or business trust, etc.	
first organized, formed or incorporated under the laws of Florida	SE SE
(Enter state, or if a non-U.S. entity, the name of the coun	三百 三
on October 10, 1997	
on October 10, 1997 (Enter date "Other Business Entity" was first organized, formed or	incornorated) Ti
3. If the jurisdiction of the "Other Business Entity" was changed, the state under the laws of which it is now organized, formed or incorporated:	OF SIATE OF COUNTRY PLOSIBLE
4. The name of the Florida Limited Liability Company as set forth in the	·
Articles of Organization:	
Weston Center, LLC	<del></del> '
(Enter Name of Florida Limited Liability Company)	

SECRETABLE	08 MAY 29
?	PX
	<u>:</u>
	CD

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.)

Signature of Authorized Person:

Signed this <u>13</u> day of \_\_

Printed Name: Kenneth Edelman

Title: President/Director

## **Articles of Organization** For Florida Limited Liability Company

### Article I

The name of the Limited Liability Company is: Weston Center, LLC

### Article II

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

2600 Glades Circle Suite 100 Weston, FL 33327

The mailing address of the Limited Liability Company is:

2600 Glades Circle Suite 100 Weston, FL 33327

### **Article III**

The purpose for which this Limited Liability Company is organized is:

The Company is organized to continue the business of WESTON CENTER, INC. engage in any other lawful business permitted under the laws of the United States and the States of Florida.

### Article IV

The name and Florida street address of the registered agent is:

Kenneth Edelman 2600 Glades Circle Suite 100 Weston, FL 33327

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.

Registered Agent Signature:

### Article V

The name and address of managing members/managers are:

Title: MGRM KENNETH EDELMAN 2600 Glades Circle Suite 100 Weston, FL 33327

Title: MGRM **DEBRA EDELMAN** 2600 Glades Circle Suite 100 Weston, FL 33327

Title: MGRM ANDY LAROSA 801 Oak Shadows Road Celebration, FL 34747

### **Article VI**

The effective date for this Limited Liability Company shall be: (Date of filing)

Signature of member or an authorized representative of a member

Michelle N. Barron, Esq.

Representative for the members