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(Re	questor's Name)	
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	y/State/Zip/Phone #	
(Cit	y/State/Zip/Pflone #	·)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name	r)
(Do	cument Number)	
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Certified Copies	_ Certificates o	of Status
Special Instruction to	Filing Officer:	
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ECRETARY OF STATE

COVER LETTER

_	stration S sion of Co	ection orporations						
SUBJECT:	Baukn	ight Law LLC (Name of Resulting	Florida	Limited Co	ompany)			
	Other Bu	ate of Conversion, Ar siness Entity" into a " 8.439, F.S.						nitted to
Please retur	n all corre	spondence concerning	g this r	matter to:				
Leslie Baukr	ight Nixon				_		SE	200
		(Contact Person)					LAH CRE	86 ⊆
Bauknight La	W	(Firm/Company)			_		TAR ASS	ا
2011 CW 16	04h A 445						E C	J
3811 SW 16	Jin Ave, #2	(Address)			-		F.S.	<u>-</u>
Miramar, FL	33027	(_	\$	TATE ORIDA	008 JUL -7 P 4: 20
	(C	City, State and Zip Code)				•		
For further	informatio	on concerning this ma	tter, pl	ease call:				
Leslie Nixon			_at (_	754	<u>) 581-5</u>	5558		
(Nar	ne of Contac	ct Person)		(Area Code	e and Da	ytime Tele _l	phone Nu	mber)
Enclosed is	a check fo	or the following amou	int:					
\$150.00 Fi (\$25 for Conv & \$125 for An of Organization	ersion rticles	\$155.00 Filing Fees and Certificate of Status		80.00 Filing Certified Co		□\$185.0 Certified Certificat	Copy, and	d
STREET A Registration Division of Clifton Bui 2661 Execu	n Section Corporati Iding Itive Cente	ons er Circle		Regist Division P. O. I	ration S on of C Box 632	orporatio	ns	

FILED

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.

(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation	
(Enter entity type. Example: corporation, limited partnership,	sole proprietorship,
general partnership, common law or business trust	t, etc.)
first organized, formed or incorporated under the laws of Florida	
(Enter state, or if a non-U.S. entity, the name of the c	country) A SEC
on June 14, 2006	AR L
(Enter date "Other Business Entity" was first organized, forme	d or incomporated)
3. If the jurisdiction of the "Other Business Entity" was changed, the under the laws of which it is now organized, formed or incorporated:	State or CORIDA
4. The name of the Florida Limited Liability Company as set forth in Articles of Organization:	the attached
Bauknight Law LLC	
(Enter Name of Florida Limited Liability Compa	any)
	2008

Signed this 2 day of July	20 08	
Signature of Member or Authorized Rep	resentative of Limited Lial	bility Company:
Signature of Member or Authorized Represented Name: Leslie Bauknight Nixon	sentative: Title: President	
Signature(s) on behalf of Other Business E	Entity: [See below for requir	red signature(s).]
Printed Name: Uslie Broknish Nixe	n Title: Presiden	t Owner
Signature:Printed Name:	Title	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title	
Signature: Printed Name: Signature:	Title:	T S S
Signature:Printed Name:	Title:	ARY SEE
If Florida Corporation: Signature of Chairman, Vice Chairman, Dire		FLORE FLORE
If Directors or Officers have not been selected		20 TE
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnersh	nip:
All others: Signature of an authorized person.		
Fees:		
Certificate of Conversion: Fees for Florida Articles of Organiz Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$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:

(Must end with the words "Limited Liability ("LLC.")	Company," the a	bbreviation "L.L.C" or the designation	
ARTICLE II - Address:			
The mailing address and street add Liability Company is:	dress of the p	orincipal office of the Limited	
Principal Office Address:		Mailing Address:	
3811 SW 160th Ave. #207		P.O. Box 279322	
Miramar, FL 33027	+	Miramar, FL 33027	
The name and the Florida street ac Leslie Baukni	ddress of the ight Nixon Nam	SEE, FL	FILED
	Oth Ave, #207		
Florida street	address (P.C	D. Box NOT acceptable)	
Miramar		FL 33027	
	City, Sta	te, and Zip	
Having been named as registere above stated limited liability com	pany at the p		ite, 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) 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>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Leslie Bauknight Nixon
	3811 SW 160th Ave, #207
	Miramar. FL 33027
	
	
	(Use attachment if necessary)
	`
ARTICLE V: Effective date, if other than the o	
(T)	(OPTIONAL)
(The effective date: 1) cannot be prior to no document is filed by the Florida Departmen	
the effective date listed in the attached Ce	
date is listed therein.)	
<u>REQUIRED</u> SIGNATURE:	SS A
Signature of a member or an aut	horized representative of a member.
, and the second	BA F
(In accordance with section 608.40	08(3), Florida Statutes, the execution
	rmation under the penalties of perjury
that the facts stat	ted herein are true.)
Leslie Bauknight Nixon	
Typed or printe	ed 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)