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PICK-UP WAIT MAIL		
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(Business Entity Name)		
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(Document Number)		
Certified Copies Certificates of Status		
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SECRETARY OF STATE
TALLAHASSEE, FIRE

J. BRYAN AUG 2 8 2008

EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations						
SUBJECT: Finn (and of Tallahossee) (Name of Resulting Florida Limited Company)	Inc.					
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:	م سد					
Desmond O Neill (Contact Person)						
(Firm/Company)	335°SEE					
Zata Verdura Point Drive (Address)						
TallaVassee, Fl. 32311 (City, State and Zip Code)						
For further information concerning this matter, please call:						
at () (Name of Contact Person) (Area Code and Daytime Total Code and Daytime Tota	Геlephone Number)					
Enclosed is a check for the following amount:						
(\$25 for Conversion and Certificate of and Certified Copy Certif	85.00 Filing Fees, fied Copy, and ficate of Status					
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDR Registration Section Division of Corpora P. O. Box 6327 Tallahassee, FL 32	n ations					

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: Finh Land of Tallahassee, Inc. # P0800006				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a <u>Corporation</u> . (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 For Corporated (Enter state, or if a non-U.S. entity, the name of the country)				
on (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:				
Finn Land of Tallanassee UC				
(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 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	day of	20	
Signature of Me	ember or Authorized Repres	entative of Limited Liability	Company:
Signature of Men Printed Name: 2	mber or Authorized Represent シモシ州のベローブ・ロッド	ative: KON ILL Title: MANA GING	ULL GOR
Signature(s) on b	ochalf of Other Business Entit	ty: [See below for required si	gnature(s).]
Signature: Printed Name:	D. O'NEILL	Title: Mawa	DIRECTOR
	•	Title:	
		Title:	
Signature:			
Printed Name:		Title:	
Signature: Printed Name:		Title:	
			•
Printed Name:		Title:	08 80 80
If Florida Corpo			AR C
	rman, Vice Chairman, Director ficers have not been selected, a		AUG 28 CRETARY CAHASSI
If Florida General Signature of one Control	<mark>al Partnership or Limited Lia</mark> General Partner.	ability Partnership:	AND:
	ed Partnership or Limited Lia L General Partners.	bility Limited Partnership:	34 DRIDA
All others: Signature of an au	athorized person.		
Fees:			
Fees for F Certified	e of Conversion: Florida Articles of Organizatio Copy: e of Status:	\$25.00 on: \$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 Company," the abbreviation "L.L.C.,"

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

ARTICLE II - Address: The mailing address and street address of the pr Liability Company is:	incipal office of the Lin	nited	
Principal Office Address:	Mailing Address:		
2979 Verdura Point Drive	some	SEC SEC	
Tallonassee , Fl. 32311		AUG 2	
ARTICLE III - Registered Agent, Registered Signature: The Limited Liability Company cannot serve as its own Regist ndividual or another			
business entity with an active Florida registration.)		REAL PROPERTY.	

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

Tallahassee FL 3231

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 \$08,

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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
marm	Desmand O'Neill 2979 Vendura Point Driv Tallahassee, Fl. 32311
	D8 AU
	TARY OF S
ARTICLE V: Effective date, if other than the dat	(Use attachment if necessary (Use attachment if necessary) (OPTIONAL)
(The effective date: 1) cannot be prior to nor document is filed by the Florida Department of the effective date listed in the attached Cert date is listed therein.)	more than 90 days after the date this of State; <u>AND</u> 2) must be the same as
REQUIRED SIGNATURE: Signature of a member or an autho	Shew . rized representative of a member.
(In accordance with section 608.408 of this document constitutes an affirm that the facts stated	(3), Florida Statutes, the execution nation under the penalties of perjury herein are true.)
Typed or printed Filing Fees:	name of signee

\$125.00 Filing Fee for Articles of Organization and Designation \$125.00 Filing Fee for Articles of Cognitive of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)
Page 2 of 2