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(Red	questor's Name)	
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PICK-UP	TIAW T	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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Office Use Only

EFFECTIVE DATE 11-18.08



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SECRETARY OF STATE
TALLAHASSEE, FLORDA

D. BRUCE

NOV 19 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: NATHAN & COMPANY, LLC (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:					
RAMESH NATHAN	_				
(Contact Person) BASELINEAGENT.COM, INC.					
19046 BRUCE B DOWNS BLVD. #107	S NUR				
(Address) TAMPA, FL 33647 (City, State and Zip Code)	DII 17: 1.2				
	J				
For further information concerning this matter, please call:					
RAMESH NATHAN at (813) 579-5034 (Name of Contact Person) (Area Code and Daytime Telephone Number)					
Enclosed is a check for the following amount:					
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ■ \$155.00 Filing Fees and Certified Copy Status ■ \$180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status					
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314					

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.

Company in accordance with discourse, a second statement	
1. The name of the "Other Business Entity" immediately prior to the filing of this	
Certificate of Conversion is: NATHAN & COMPANY, INC.	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a <u>CORPORATION POSODO 49700</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 FLORIDA	
(Enter state, or if a non-U.S. entity, the name of the country)	
on 5/17/2008 .	
(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 and the laws of which it is now promised formed or incorporated.	7
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	コフ
NATHAN & COMPANY, LLC	
(Enter Name of Florida Limited Liability Company)	
5. If not effective on the date of filing, enter the effective date: 1 / 18-08 (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.)	

Page 1 of 2

Signed this 17 day	of NOVEMBER	_ 20_08	
		tive of Limited Liability Company:	
Baselinea	GENT. COH, IN C.		
	ther Business Entity: [S	See below for required signature(s).]	
Signature: Patha			
Printed Name: RAMESH NA	THAN	Title: PRESIDENT, DIRECTOR	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		_Title:	
If Florida Corporation:		7	20
Signature of Chairman, Vice	Chairman, Director, or O	fficer.	0
If Directors or Officers have	not been selected, an Inco	orporator must sign.	<u> </u>
If Florida General Partners	hip or Limited Liability	Partnership:	<u> </u>
Signature of one General Par	tner.	PN S.F.L.	E
If Florida Limited Partners Signatures of <u>ALL</u> General F			O
All others: Signature of an authorized pe	rson.		
Fees:			
Certificate of Conve Fees for Florida Arti Certified Copy: Certificate of Status:	cles of Organization:	\$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:

	COMPANY, LLC "Limited Liability Company," the abl	breviation "L.L.C.," or the designa	<u>+</u>	
"LLC.")	• • •	~		
ARTICLE II - Add The mailing address Liability Company	s and street address of the pr	incipal office of the Limit	ed	
Principal Office A	<u>ddress:</u>	Mailing Address:		
19046 BRUCE B DO TAMPA, FL 33647	WNS.BLVD. #107	19046 BRUCE B DOWNS TAMPA, FL 33647	BLVD	
Signature: (The Limited Liability Co individual or another business entity with an a	egistered Agent, Registered impany cannot serve as its own Regist ctive Florida registration.)	tered Agent. You must designate a	FILE 8 NOV 18 ECRETARY O	
	RAMESH NATHAN		ED PN 12: 42	
	Name		[™] 5	
	19046 BRUCE B DOWNS E	· 	. •	
Florida street address (P.O. Box NOT acceptable)				
	TAMPA	FL 33647		
City, State, and Zip				
Having heen nam	ned 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..

Régistered 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> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	BASELINEAGENT.COM, INC.
	19046 BRUCE B DOWNS BLVD. #107
	TAMPA, FL 33647
<u> </u>	
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the da	to of filing: 11-18-08
ARTICLE V. Encenve date, it office than the da	(OPTIONAL)
(The effective date: 1) cannot be prior to nor	
document is filed by the Florida Department	of State; AND 2) must be the same as
the effective date listed in the attached Cert	ificate of Conversion, if an effective
date is listed therein.)	
DECLIEDED CLON ATTION	
REQUIRED SIGNATURE:	70 -
Platta	86.
Signature of a member or an autho	rized representative of a member?
Signature of a member of an autilo	Tized representative of a member 7
	(3), Florida Statutes, the execution ∞
of this document constitutes an affirm	
that the facts stated	i herein are true.)
RAMESH NATHAN, ON BEHALF C	DF BASELINEAGENT.COM, INC
Typed or printed	
Filing Fees:	
\$125.00 Filing Fee for Articles of O	rganization and Designation

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

Page 2 of 2