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(Requestor's Name) (Address)	400138125464
(Address) (City/State/Zip/Phone #)	400100120404
PICK-UP WAIT MAIL	12/19/0801010007 **150.00
(Business Entity Name)	
(Document Number)	
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EXAMINER



CT1203 Governors Square Blvd. Suite 101 Tallahassee, FL 32301-2960

850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

December 19, 2008

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 7442599 SO

Customer Reference 1: None Given

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

BREW-PY, CO (FL) Conversion + 6 Qualification

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Christina McNeair **CL** Operations Specialist Christina.McNeair@wolterskluwer.com - OBOEC 19 PH 2: 45

December 19, 2008

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301 CT 3 ALAHASSE FLORIDA

Re:

Order #: 7442599 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

BREW-PY, CO (FL) Conversion Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Christina McNeair
CL Operations Specialist
Christina.McNeair@wolterskluwer.com

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.

iness Entity" immed	liately prior to the filing of this
BREW-PY, CO.	PO 6000132 808
r Name of Other B	usiness Entity)
is aCORPORATI	ON
	ited partnership, sole proprietorship, or business trust, etc.)
porated under the la	ws of FLORIDA
a non-U.S. entity,	the name of the country)
0/13/2006	
	organized, formed or incorporated)
	was changed, the state or country d or incorporated:
ited Liability Comp	oany as set forth in the attached
LC	,
of Florida Limite	d Liability Company)
be prior to nor model and department of S	Pective date: ore than 90 days after the date this State; AND 2) must be the same as the rganization, if an effective date is
	is aCORPORATI : corporation, limits riship, common law porated under the laf a non-U.S. entity, 0/13/2006 s Entity" was first her Business Entity" was rist worganized, formed the Liability Computed Liability Computed filling, enter the efficient to nor media Department of States.

Page 1 of 2

Signed this 17 day of December	<u>2008</u> .
Signature of Member or Authorized Represent	ative of Limited Liability Company:
Signature of Member or Authorized Representation Printed Name: Frederica Brand	Title: MERM
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature: /s/ FREDERICIA BRANT	
Printed Name: Fredericia Brant	Title:VP
Signature:	
Printed Name:	Title:
Signatura	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title
Timed Name.	
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	•
Fees:	
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	LULI	E I	_ 7	Vam	۵.
ANI		, P.	- 1	72111	

The name of the Limited Liability Company is:

BREW-PY, 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:

1035 GATEWAY BLVD 1035 GATEWAY BLVD **UNIT 210** UNIT 210 **BOYNTON BEACH, FL 33426 BOYNTON BEACH, FL 33426**

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:

FREDERICIA BRANT	
	Name
3361 FAIRLANE FARM	S ROAD
Florida street address	s (P.O. Box NOT acceptable)
WELLINGTON	FL ³³⁴¹⁴
Cit	v State and 7 in

Mailing Address:

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, 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:

"MGRM" = Managing Member	Name and Address:
MGRM	FREDERICIA BRANT
	1035 GATEWAY BLVD, UNIT 210
	BOYNTON BEACH, FL 33426
MGRM	
- WORW	JONATHAN S ADAMS
	1035 GATEWAY BLVD, UNIT 210
	BOYNTON BEACH, FL 33426
	(Use attachment if necessary)
nent is filed by the Florida Department fective date listed in the attached Consisted therein.) REQUIRED SIGNATURE:	(OPTIONAL) or more than 90 days after the date this nt of State; AND 2) must be the same as ertificate of Conversion, if an effective
ffective date: 1) cannot be prior to nent is filed by the Florida Department ective date listed in the attached Collisted therein.) REQUIRED SIGNATURE:	(OPTIONAL) or more than 90 days after the date this nt of State; <u>AND</u> 2) must be the same as

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2