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(Requestor's Name)				
(Address)				
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(Cit	ty/State/Zip/Phone	<b>⇒</b> #)		
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	of Status		
Special Instructions to	Filing Officer:	1		
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Office Use Only



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EXAMINER

08 DEC 30 AM IO: 45
SECRETARY OF STATE
TALLAHASSEE, FI-ORIDA



CT 1203 Governors Square Blvd. Suite 101 Tallahassee, FL 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

December 30, 2008

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301 OBOEC 30 AMID: 43

Re:

Order #: 7450822 SO

Customer Reference 1: 50216383.000001 Customer Reference 2: Gomez Rodriguez

Dear Department of State, Florida:

Please obtain the following:

Elkton, Inc. (FL) Conversion Florida

Elkton USA LLC (FL) Formation 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

December 30, 2008

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



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Christina McNeair CL Operations Specialist Christina.McNeair@wolterskluwer.com OB DEC 30 AM 10: 45

## **Certificate of Conversion** For "Other Business Entity" Into Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to

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: Elkton, Inc.
(Enter Name of Other Business Entity)  3. The "Other Pusiness Entity" is a corporation
2. The "Other Business Entity" is a corporation 5 6
(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 07/02/91 (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:
N/A
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Elkton USA LLC
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: 12/30/08
(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

Page 1 of 2

effective date listed in the attached Articles of Organization, if an effective date is

listed therein.)

Signed this 29 day of December	20 08
Signature of Member or Authorized Represent	ative of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: Manuel Gomez . Jr.	Title; Meneger/Autholized Rep
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature: Wanuel Gomez, Jr.	
Printed Name: Manuel Gomez, Jr.	Title: VP. S, T
•	
Signature: Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	ty I as the same.
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Continues of Court	#25 00
Certificate of Conversion: Fees for Florida Articles of Organization:	\$25.00
Certified Copy:	\$125.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Elkton USA LLC		
(Must and with the words "L "LLC:")	imited Liability Company	"the abbreviation "L.L.C.," or the designation
ARTICLE II - Addr	ess:	
The mailing address a Liability Company is:		the principal office of the Limited
Principal Office Add	lress:	Mailing Address:
445 Grand Bay Drive #	315	430 Grand Bay Drive # 607
Key Biscayne, FL 3314 ARTICLE III - Regi Signature:	stered Agent, Regi	Key Biscayne, FL 33149 stered Office, & Registered Agen
ARTICLE III - Regi Signature: (The Limited Liability Compindividual or another business entity with an activ	stered Agent, Reginary cannot serve as its owner Florida registration.)	Key Biscayne, FL 33149 stered Office, & Registered Agen n Registered Agent. You must designate an f the registered agent are:
ARTICLE III - Regi Signature: (The Limited Liability Compindividual or another business entity with an activ	stered Agent, Regionary cannot serve as its ow we Florida registration.)	Key Biscayne, FL 33149  stered Office, & Registered Agen  n Registered Agent. You must designate an  f the registered agent are:
Key Biscayne, FL 3314  ARTICLE III - Regi Signature: (The Limited Liability Compindividual or another business entity with an activ The name and the Flo	stered Agent, Reginany cannot serve as its owner Florida registration.) rida street address of Manuel Gomez, Jr	Key Biscayne, FL 33149 stered Office, & Registered Agen n Registered Agent. You must designate an f the registered agent are:
Signature: (The Limited Liability Compindividual or another business entity with an active The name and the Flo	stered Agent, Reginary cannot serve as its own reflorida registration.) rida street address of Manuel Gomez, Jr	Key Biscayne, FL 33149 stered Office, & Registered Agen n Registered Agent. You must designate an f the registered agent are:
Key Biscayne, FL 3314  ARTICLE III - Regi Signature: (The Limited Liability Compindividual or another business entity with an activ  The name and the Flo	stered Agent, Reginary cannot serve as its owner Florida registration.)  rida street address of Manuel Gomez, Jr.  445 Grand Bay Drive lorida street address  Key Biscayne	Key Biscayne, FL 33149  stered Office, & Registered Agen  n Registered Agent. You must designate an  f the registered agent are:  Name  #315

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

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> "MGR" <del></del> Manager	Name and Address:
"MGRM" = Managing Member	
Manager	Manuel Gomez . Jr .
	445 Grand Bay Drive # 315
-	Key Biscayne, FL 33149
*	
· · ·	
	(Use attachment if necessary)
NOTICE TO BE A STORY OF THE STO	•
RTICLE V: Effective date, if other than the	(OPTIONAL)
he effective date: 1) cannot be prior to no	
ocument is filed by the Florida Departmen	
e effective date listed in the attached Ce	
te is listed therein.)	
REQUIRED SIGNATURE:	
Motors	
Signature of a member or an author	orized representative of a member.
of this document constitutes an affi-	08(3), Florida Statutes, the execution rmation under the penalties of perjury ed herein are true.)
Manuel Gomez, Jr., Manager/Authoriz	
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)

Page 2 of 2