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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Sity/State/2/p/) Holic #/
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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01/05/09--01067--020 **150.00



S. HAWKES

JAN 8 2009

EXAMINER

COVER LETTER

Division of C						
SUBJECT: Comm	nunicating Plus LI	LC				
	(Name of Resulting	Florida	Limited	l Comp	oany)	
	siness Entity" into a "					and fees are submitted to ty Company" in
Please return all corre	espondence concerning	g this	matter	to:		
Sondra Lee						
	(Contact Person)	······				
Communicating Plus						
	(Firm/Company)					
P.O. Box 4954						
	(Address)					
Clearwater, FL 33758						
(0	City, State and Zip Code)					
For further information	on concerning this man	tter, pl	ease ca	all:		
Sondra Lee		at (727) (510-3	447
(Name of Conta	ct Person)		(Area C	ode ar	id Day	time Telephone Number)
Enclosed is a check fe	or the following amou	mt:				
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status		80.00 Fi Certified	_	æs	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:		MA	ILIN	G A	DDRESS:
Registration Section						ection
Division of Corporati Clifton Building	ons			ision). Box		orporations
2661 Executive Center	er Circle					L 32314
Tallahassee, FL 3230			1 (41)	· ~** 16409	, I	A CMUIT

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: Communicating Plus Inc. POI -84977
(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 Florida (Enter state, or if a non-U.S. entity, the name of the country)
on August 28, 2001 (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:
Communicating Plus LLC
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: 01/01/2009
(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; <u>AND</u> 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 31st day of December	20 08
Signature of Member or Authorized Representa	tive of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: Sondra Lee	: Soulia Lu Title: President
Signature(s) on behalf of Other Business Entity:	- 4
Signature: Soulia L	<u>u</u>
Printed Name: Sondra Lee -	President
Signature:	
Printed Name:	_ Title:
Signature	ं क्षेत्र के विकास
Signature:Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	Tial
Printed Name:	_ True:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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

ARTICLE I - Name:

The name of the Limited Liability Compa	ny is:
Communicating Plus LLC	6
(Must end with the words "Limited Liability Company," "LLC.")	"the abbreviation "L.L.C.," or the designation
ARTICLE II - Address:	三 三
The mailing address and street address of	The state of the s
Liability Company is:	
Principal Office Address:	Mailing Address:
2333 Feathersound Dr.	P.O. Box 4954
B-403	Clearwater, FL 33758
Clearwater, FL 33762	
ARTICLE III - Registered Agent, Registing Signature: (The Limited Liability Company cannot serve as its own individual or another business entity with an active Florida registration.)	, ,
The name and the Florida street address o	f the registered agent are:
Sondra Lee	
	Name
2333 Feathersound D	r. B-403
Florida street address	(P.O. Box <u>NOT</u> acceptable)
Clearwater	FL 33762

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 of provided for in

Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

City, State, and Zip

(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	Name and Address:
"MGRM" = Managing Member 326 3	
*C1.**	Same State of
MGR	Sondra Lee
	2333 Feathersound Dr. B403
	Clearwater, FL 33762
	25
	69
	· ·
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EV: Effective date, if other than the date	(OPTIONAL)
LE V: Effective date, if other than the date	of filing: 01/01/2009 (OPTIONAL) nore than 90 days after the date State; AND 2) must be the sam
LE V: Effective date, if other than the date ective date: 1) cannot be prior to nor not is filed by the Florida Department of ctive date listed in the attached Certifisted therein.)	of filing: 01/01/2009 (OPTIONAL) nore than 90 days after the date State; AND 2) must be the samicate of Conversion, if an effect
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\$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