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(Address)	
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PICK-UP WAIT MAIL	
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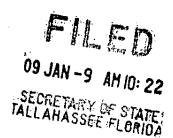
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#### **COVER LETTER**

TO: Registration Section Division of Corporations	<b>A</b> .
SUBJECT: AMENICAN	Plorida Limited Company)
The enclosed Certificate of Conversion, Ar convert an "Other Business Entity" into a "accordance with s. 608.439, F.S.	ticles of Organization, and fees are submitted to Florida Limited Liability Company" in
Please return all correspondence concerning	g this matter to:
Shawn Marzak  American Para Latio  (Firm/Company)  3042 May Bry Ln.  (Address)  (City, State and Zip Code)	<u></u>
For further information concerning this man	tter, please call:
Shuum Marzall (Name of Contact Person)	at (407) 860 - 4422 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy  \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P. O. Box 6327

2661 Executive Center Circle Tallahassee, FL 32301

P. O. Box 6327 Tallahassee, FL 32314



## 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: American Vod and Vatio			
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a Sole Proprietor Ship.			
(Enter entity type. Example: corporation, limited partnership, sole propfictorship, 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 Moren Ser 29 2008.4  (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:  (Enter Name of Florida Limited Liability Company)			
(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; <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 5 day of Lincary	_20 <u>09</u>		
Signature of Member or Authorized Representative of Limited Liability Company:			
Signature of Member or Authorized Representative Printed Name:	Title: MORM		
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]			
Signature: Stath Manau	Title: MGRM		
Signature:Printed Name:	_ Title:		
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Signature: Printed Name:	Title:		
Signature:Printed Name:	_Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.			
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.			
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.			
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 Company is:	$\alpha$ $\alpha$ $\alpha$ $\alpha$
Homerican Homerican	Pool of Patio L
(Must end with the words "Limited Liability Company," the abbr	eviation "L.L.C.," or the designation
"LLC.")	
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited
Liability Company is:	•
Principal Office Address:	Mailing Address:
3042 May Bry In.	
01/ando 1 F1 32922	Game
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Register individual or another business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
Shawn May	rall
3042 May 13°	y In.
Florida street address (P.O. I	36x <u>NOT</u> acceptable)
_ nalundo,	FL 32811
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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member  MGRM" = Managing Member	Shown Marzak 3012 may Bry In. onl. Fl. 32822
ARTICLE V: Effective date, if other than the	(Use attachment if necessary)  date of filing:  (OPTIONAL)
(The effective date: 1) cannot be prior to not document is filed by the Florida Department the effective date listed in the attached Cedate is listed therein.)  REQUIRED SIGNATURE:	or more than 90 days after the date this at of State; <u>AND</u> 2) must be the same as
Signature of a member or an auti	horized representative of a member.
of this document constitutes an affi that the facts state	08(3), Florida Statutes, the execution rmation under the penalties of perjurated herein are true.)
Filing Fees:	ed name of signce  AN IO: 22

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)