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(Reque	estor's Name)	
(Addre	ss)	
(Addres	ss)	
(City/Si	tate/Zip/Phone	#)
. PICK-UP	WAIT	MAIL
(Busine	ess Entity Name	e)
(Docum	nent Number)	
Certified Copies	Certificates	of Status
1		
Special Instructions to Filir	ng Officer:	

Office Use Only

G. MCLEOD

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EXAMINER



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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: Antoinette Gennaro, LLC (Name of Resulting Florida Limited Company)				
The enclosed Certificate convert an "Other Busin accordance with s. 608.	ness Entity" into a "F		and fees are submitted to ity Company" in	
Please return all corresp	oondence concerning	this matter to:		
Antoinette Gennaro	(Contact Person)			
Antoinette Gennaro, LLC	(Firm/Company)			
6808 Satin Leaf Road S,	#201 (Address)			
Naples, FL 34109 (City	y, State and Zip Code)			
For further information	concerning this mat	ter, please call:		
Antoinette Gennaro		at (239) 514	7080	
(Name of Contact	Person)	(Area Code and Da	aytime Telephone Number)	
Enclosed is a check for	the following amour	nt:		
(\$25 for Conversion a	\$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: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A Registration Division of O P. O. Box 63 Tallahassee,	Section Corporations 27	

DIVISION OF SCHOOL 16

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.

The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: Antoinette Gennaro, P.A.				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a Corporation (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 10/17/05 (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:				
Antoinette Gennaro, LLC				
(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; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)				

• • •	• *	
Signed tl	nis day of	20
Signatuı	re of Member or Authorized Represent	ative of Limited Liability Company:
		# P = 0
Signature	e of Member or Authorized Representativ	e: unforne ho fennais
Printed N	e of Member or Authorized Representativ Iame: <u>Antoinette Gennaro</u>	Title: President
Sionatur	e(s) on hehalf of Other Business Entity:	See below for required signature(s).
Signature	e: aspetto fensus	
Printed N	Vame:	Title: President
I I I I I I I I I I I I I I I I I I I		
Signature	e:	
Printed N	Name:	Title:
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Signature	: :	
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G'		
Signature	e: Name:	Titler
Printed N	vame:	Title:
Signature	۵٠	
Printed N	e:	Title:
Timedi		
If Florid	a Corporation:	
	e of Chairman, Vice Chairman, Director, or	Officer.
	ors or Officers have not been selected, an In	
		•
If Florid	a General Partnership or Limited Liabil	ity Partnership:
Signature	e of one General Partner.	
	a Limited Partnership or Limited Liabil	ity Limited Partnership:
Signatur	es of ALL General Partners.	
All other		
Signature	e of an authorized person.	
Fees:		
,	Certificate of Conversion:	\$25.00
-		\$125.00 \$125.00
	Fees for Florida Articles of Organization:	\$30.00 (Optional)
	Certified Copy:	* *
(Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Gennaro, LLC	
(Must end with the word "LLC.")	ls "Limited Liability Comp	any," the abbreviation "L.L.C.," or the designation
ARTICLE II - Ad The mailing addre Liability Company	ss and street address	of the principal office of the Limited
Principal Office	Address:	Mailing Address:
6808 Satin Leaf Ro	•	+ Same
Naples, FL 34109 ARTICLE III - R		
ARTICLE III - R Signature: (The Limited Liability C individual or another business entity with an	Registered Agent, R. Company cannot serve as its active Florida registration. Florida street addres	egistered Office, & Registered Agent own Registered Agent. You must designate an s of the registered agent are:
ARTICLE III - R Signature: (The Limited Liability C individual or another business entity with an	Registered Agent, Recompany cannot serve as its active Florida registration.	egistered Office, & Registered Agent own Registered Agent. You must designate an s of the registered agent are:
ARTICLE III - R Signature: (The Limited Liability C individual or another business entity with an	Registered Agent, Rompany cannot serve as its active Florida registration. Florida street address Antoinette Gennar	egistered Office, & Registered Agen own Registered Agent. You must designate an s of the registered agent are:
ARTICLE III - R Signature: (The Limited Liability C individual or another business entity with an	Registered Agent, Rompany cannot serve as its active Florida registration. Florida street addres Antoinette Gennar 6808 Satin Leaf R	egistered Office, & Registered Agen own Registered Agent. You must designate an s of the registered agent are: Name
ARTICLE III - R Signature: (The Limited Liability C individual or another business entity with an	Registered Agent, Rompany cannot serve as its active Florida registration. Florida street addres Antoinette Gennar 6808 Satin Leaf R	egistered Office, & Registered Ager own Registered Agent. You must designate an s of the registered agent are: Name oad S, #201

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 "MGRM" = Managing Member	Name and Address:
mary	ANTONIETTE GENNARO 10808 SATIN LEAFROS #201 NAPLES, FL-3H109
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the of the effective date: 1) cannot be prior to not document is filed by the Florida Department he effective date listed in the attached Cellate is listed therein.)	or more than 90 days after the date this t of State; <u>AND</u> 2) must be the same as
REQUIRED SIGNATURE:	1
	horized representative of a member.
of this document constitutes an affi	08(3), Florida Statutes, the execution rmation under the penalties of perjury ted herein are true.)
Antoinette Gennaro	
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)