# L09000029552

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basilioss Eller, Halle)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
P03-120031
1,00
400010 A. LUNT
Special Instructions to Filing Officer:  PO3-122547  LUNT  MAR 2 6 2009
MAR 2 6 2009
EXAMINER

Office Use Only



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TILEU 2009 MAR 25 PM 2: 24 SECRETARY OF STATE

### **COVER LETTER**

<b>TO:</b> Registration S Division of C			
SUBJECT: St	ep of Fauth	COUNSELIA Florida Limited Company	Services
	usiness Entity" into a '	rticles of Organization, 'Florida Limited Liabi	and fees are submitted to lity Company" in
Please return all corr	espondence concernin	g this matter to:	
Gail Co	Contact Person)		T <sub>S</sub>
Step of F	outh Couns (Firm/Company)	eling Service	S ESE
348 RIV	er Isles	J	ASSEE
Braden	(Address)  On Flori City, State and Zip Code)	<u>da 34208</u>	FLORIDA
For further information	on concerning this ma	tter, please call:	
Name of Conta	NAVID	at (8/03) Of (Area Code and Da	90 3259 aytime Telephone Number)
Enclosed is a check f	or the following amou	int:	
\$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	S:	MAILING A	
Registration Section		Registration !	
Division of Corporati Clifton Building	OHS	Division of C P. O. Box 633	
3			<del>-</del> -

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## **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:					
Step of Faith Counseling Services Inc.					
Step of Faith Counseling Services, Inc. (Enter Name of Other Business Entity)					
~ ^					
2. The "Other Business Entity" is a Scorporation.					
(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 October 2003. Fid 550852263					
(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 count with under the laws of which it is now organized, formed or incorporated:					
ander the laws of which it is now organized, formed of incorporated.					
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:					
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:					
Articles of Organization:					
Step of Faith Counseling Services L.L.C (Enter Name of Florida Limited Liability Company)					
- STEP OF TOUTS CONSEINED DEVICES L'K'C					
(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 this <u>23</u> day of <u>March</u>	20 0 9			
Signature of Member or Authorized Representa				
Signature of Member or Authorized Representative Printed Name: Gaul A. Canario	e: Harl X Carasio Title: President			
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]			
Signature: All A Casario Printed Name: All A Casario	Title: <u>President</u>			
Signature: Nelson M. Cavar	OTitle: Hanager			
Signature:				
Signature: Printed Name:	Title:			
Signature: Printed Name:	Title:			
Signature:Printed Name:				
Signature:	L CR			
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 Liabili	tv Partnershin:			
Signature of one General Partner.				
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> 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

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:				
Step of Fauth Counsel	ina Services L.L.C			
(Must end with the words "Limited Liability Company," the abbruLLC.")	reviation "L.L.C.," or the designation			
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:			
348 River Isles				
3806 Chinaberry Rd Brodenton, Florida 34208	same			
ARTICLE III - Registered Agent, Registered				
Signature:	-			
(The Limited Liability Company cannot serve as its own Register individual or another	rred Agent. You must designate and			
business entity with an active Florida registration.)	ECR 9N	n		
The name and the Florida street address of the re	7 m = 7			
Nelson M. Co	anario Eng	_ 17		
3806 Chinabe	erru Koad 55 % '	J		
Florida street address (P.O. I	Box NOT acceptable)			
Bradenton	FL 34208"			
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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Gail A. Campio 348 River Isles
MGR	Nelson M. Canario 348 River Joles Bradenton FL 34208
<del></del>	ASEC AR
	ASSEE. TO
ARTICLE V: Effective date, if other than the	
(The effective date: 1) cannot be prior to no document is filed by the Florida Departmen the effective date listed in the attached Ce date is listed therein.)	(OPTIONAL). or more than 90 days after the date this at of State; <u>AND</u> 2) must be the same as
REQUIRED SIGNATURE:	horized representative of a member.
(In accordance with section 608.4 of this document constitutes an affi	08(3), Florida Statutes, the execution irmation under the penalties of perjury ted herein are true.)

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