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Certified	Copies		Certificates	s of Status

Special Instructions to Filing Officer:

L. SELLERS

MAR 25 2009

EXAMINER

Office Use Only



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SECRETARY OF STATE TALLAHASSEE FLORIDA

FILED

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Alpino (Name of Resulting	g Florida Limited Company))
The enclosed Certificate of Conversion, A convert an "Other Business Entity" into a accordance with s. 608.439, F.S.		
Please return all correspondence concerning	_	
Lilia Casal-Dia (Contact Person) Lilia Casal-Dia (Firm/Company) 4155 SW 130 Ave (Address)	az	
(Contact Person)	PA	
(Firm/Company)	<i>i, () i j .</i>	
4155 SW 130 Are	#107	
(Address)		
Miami, F2 3318 (City, State and Zip Code)	<i>85</i>	
(City, State and Zip Code)		
For further information concerning this ma		
(Name of Contact Person)	at 305 120	19-4229
(Name of Contact Person)	(Area Code and Da	ytime Telephone Number)
Enclosed is a check for the following amou		
\$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 A	DDRESS:
Registration Section	Registration S	
Division of Corporations Clifton Building	Division of C P. O. Box 632	
2661 Executive Center Circle	Tallahassee I	

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:
(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
(Enter state, or if a non-U.S. entity, the name of the country)
on 02/29/1996. (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; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is

Page 1 of 2

listed therein.)

,	
Signed this 27 day of January	20 09
Signature of Member or Authorized Representa	tive of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: Pireday	Title: managing menuser
Signature(s) on behalf of Other Business Entity: I	See below for required\signature(s).
Signature:	Title: Director
Signature:	Tial
Printed Name:	11tie:
Signature:	
Printed Name:	Title:
•	
Signature:	m'd
Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	y 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 - Na The name of the I	me: Limited Liability Company	is:		
	Alpine 110			
(Must end with the word "LLC.")	Alpine, LLC ds "Limited Liability Company," the	e abbreviation "L.L.C.," or t	he designation	
ARTICLE II - A The mailing addre Liability Company	ess and street address of the	principal office of the	ne Limited	
Principal Office	Address:	Mailing Addres	<u>ss:</u>	
13820 Su Miani, 1) & Street Ste. E 2 33184	same		
Signature: (The Limited Liability Cindividual or another	Registered Agent, Register Company cannot serve as its own Reactive Florida registration.)	_		
The name and the	Florida street address of th	-		
	Alex P.	hoda		
	13820 Su	hoda Ime 8 Street	St. E.	
	Florida street address (P.	O. Box NOT accepta	able)	
	Miani	FL 33184	<i>r</i>	
	City, S	tate, and Zip		
above stated limi hereby accep capacity. I furth the proper and	med as registered agent and ted liability company at the ted liability company at the ten appointment as register agree to comply with the complete performance of my figations of my position as rechapter 608, Registered Agent's (CONTINUED)	place designated in the red agent and agree to provisions of all state y duties, and I am fam egistered agent as pro	his certificate, I to act in this utes relating to niliar with and ovided for the CONTROLLAND	י דרויט

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Alex Pinela
	13820 SW & Street
	13820 SW & Street Midni, Fr 33184
	,
	
	
	(Use attachment if necessary)
FICIF V. Effective data if other than the	•
FICLE V: Effective date, if other than the	date of filing:
	date of filing: (OPTIONAL)
e effective date: 1) cannot be prior to	date of filing: (OPTIONAL) nor more than 90 days after the date this
e effective date: 1) cannot be prior to nument is filed by the Florida Departme	date of filing: (OPTIONAL) nor more than 90 days after the date this nt of State; AND 2) must be the same as
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e effective date: 1) cannot be prior to nument is filed by the Florida Departme effective date listed in the attached c is listed therein.) REQUIRED SIGNATURE: Signature of a member or an automatical contents of the section 608.4	(OPTIONAL) nor more than 90 days after the date this nt of State; AND 2) must be the same as ertificate of Conversion, if an effective thorized representative of a member. 408(3) Florida Statutes, the execution
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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)

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