# L09000033561

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

Office Use Only



700148522097

04/06/09--01052--031 \*\*185.00

O9 APR -6 PH 2:43

J. BRYAN

APR -7 2009

EXAMINER

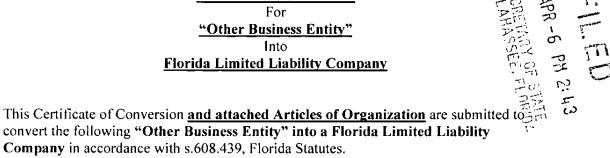
### **COVER LETTER**

**TO:** Registration Section

Tallahassee, FL 32301

Division of C	orporations			
SUBJECT: 3		Florida Limited Company		<u>-</u>
	siness Entity" into a '	rticles of Organization Florida Limited Liabi		
Please return all corre	espondence concernin	g this matter to:		
P.O.	(Contact Person)  Key Ass (Firm/Company)  Box 203  (Address)  Wet Fu	9		09 APR -6 PH 2: 43 SECRETARY OF STATE SECRETARY SEE, FLORIDA
For further information	on concerning this ma	tter, please call:		
John R. (Name of Contact	Allison III et Person)	at (305 ) 3 (Area Code and D	95 - 1610 aytime Telephone N	Number)
Enclosed is a check for	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 Certified Copy, a Certificate of Sta	ınd
STREET ADDRESS Registration Section Division of Corporatio Clifton Building 2661 Executive Cente	ons	MAILING A Registration Division of C P. O. Box 63 Tallahassee	Section Corporations 27	

## **Certificate of Conversion** For



1. The name of the "Other Busine			
Certificate of Conversion is:	PARROT KE	Y ASSOCIATES, IN	ic. #P05-1
(Enter N	ame of Other Busine	ss Entity)	
2. The "Other Business Entity" is (Enter entity type. Example: ogeneral partners)	a <u>Corporation, limited p</u> corporation, limited p nip, common law or b	artnership, sole proprietorsl	 hip,
first organized, formed or incorpor	rated under the laws of	Honde	
(Enter state, or if a	non-U.S. entity, the n	ame of the country)	
on 03/14/205 (Enter date "Other Business F	 Intity" was first organ	nized, formed or incorporate	ed)
3. If the jurisdiction of the "Other under the laws of which it is now of the state			
	)/A-		_•
4. The name of the Florida Limite Articles of Organization:	d Liability Company a	s set forth in the attached	
PARROT	KEY ASSOC	JATES, LLC	
	Florida Limited Lial		_
5. If not effective on the date of fi (The effective date: 1) cannot be document is filed by the Florida effective date listed in the attach listed therein.)	prior to nor more th Department of State;	an 90 days after the date this AND 2) must be the same as	

Signed this/3t_ day of	20_09			
Signature of Member or Authorized Representative of Limited Liability Company:				
Signature of Member or Authorized Representative Printed Name: Printed Signature	e: Title: Nanager			
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]				
Signature: Printed Name: Prutam Singh	Title: President			
/				
Signature: Printed Name:	Title:			
Signature:	Tial.			
Printed Name:				
Signature: Printed Name:				
Signature:Printed Name:	SEE P IT			
Printed Name:				
Signature:Printed Name:				
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Indiana.				
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liability 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

િ	PARROT	KEY 1	SSOCIATES abbreviation "L.L.C.," o	sue	
(Must end with the v "LLC.")	words "Limited Liability	y Company," the	abbreviation "L.L.C.," o	r the designation	
ARTICLE II - The mailing add Liability Comp	dress and street ac	ddress of the	principal office of	the Limited	
Principal Offic	ce Address:		Mailing Addr	ess:	
1010 K	ennedy Or West FL 3	#302	P.O. B	ox 2039 est FL 33	
Key	vest, FL 3	3040	KeyW	est FL 33	Ω
<b>Signature:</b> (The Limited Liabili individual or another	ty Company cannot serv	ve as its own Re	red Office, & Registered Agent. You must	stered Agent's	0
Signature: (The Limited Liabili individual or another business entity with	ty Company cannot serv	ve as its own Restration.)		stered Agent's  designate an	09 AP
Signature: (The Limited Liabili individual or another business entity with	ty Company cannot serve n an active Florida regist he Florida street a	ve as its own Restration.)	gistered Agent. You must	stered Agent's  designate an	주못
Signature: (The Limited Liabili individual or another business entity with	ty Company cannot serve an active Florida street a	tration.)  address of the National Kenned	gistered Agent, You must e registered agent a fileon, III me me file Dr. #	designate an	APR -6 FO
Signature: (The Limited Liabili individual or another business entity with	ty Company cannot serve an active Florida street a	tration.)  address of the National Kenned	e registered agent a  Hean, III  me  Dr. #=  O. Box NOT accep	designate an  ACCONTANT OF STATE OF STA	09 APR - 6 FO 2: 4
Signature: (The Limited Liabili individual or another business entity with	ty Company cannot serve an active Florida street a	tration.)  address of the Natherland Research Natherland Address (P. West	gistered Agent, You must e registered agent a fileon, III me me file Dr. #	designate an  ACCONTANT OF STATE OF STA	APR -6 FO

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:
MGRM	Pritom Singh 1010 Kennedy Dr. #302 Key Wast, Fr. 33040
<del></del>	
	TACE CAR
ARTICLE V: Effective date, if other than the d	(Carried Maria
(The effective date: 1) cannot be prior to not document is filed by the Florida Department the effective date listed in the attached Cerdate is listed therein.)	r more than 90 days after the date this 55 50 50 f State; AND 2) must be the same as 55 50 50
REQUIRED SIGNATURE?	
(In accordance with section 608.40 of this document constitutes an affir	orized representative of a member.  8(3), Florida Statutes, the execution mation under the penalties of perjury and herein are true.)
PRITAM Typed or printed	d 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)

Page 2 of 2