# L09000052741

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

Office Use Only



600156556026

05/29/09--01021--006 \*\*155.00

09 MAY 29 AM 11: 2

SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUN - 1 2009

EXAMINER

# **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: LIBBY	MAID, INC.		
	(Name of Resulting	Florida Limited Company)	1
	isiness Entity" into a "	ticles of Organization, Florida Limited Liabil	and fees are submitted to ity Company" in
Please return all corre	espondence concerning	g this matter to:	
JAIRO CARVALHO			
	(Contact Person)		
LIBBY MAID, INC.			
	(Firm/Company)		
5401 S KIRKMAN RD	SUITE 310		
	(Address)		
ORLANDO, FL 32819			
((	City, State and Zip Code)		
For further information	on concerning this ma	tter, please call:	
JAIRO CARVALHO		at ( 407 ) 583-	6028
(Name of Conta	nct Person)	(Area Code and Da	aytime Telephone Number)
Enclosed is a check f	for the following amou	int:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	2\$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 ADDRES	S:	MAILING A	ADDRESS:
Registration Section		Registration	Section
Division of Corporat	ions	Division of C	•
Clifton Building		P. O. Box 63	
2661 Executive Cent		Tallahassee,	FL 32314
Tallahassee, FL 323	01		

### **Certificate of Conversion**

For

## "Other Business Entity"

Into

### Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

	(Enter Name of Other Business Entity)
	ther Business Entity" is a CORPORATION
(Enter e	ntity type. Example: corporation, limited partnership, sole proprietorship,
	general partnership, common law or business trust, etc.)
first organ	ized, formed or incorporated under the laws of FLORIDA
	(Enter state, or if a non-U.S. entity, the name of the country)
on 04/01/2	009
	date "Other Business Entity" was first organized, formed or incorporated)
	urisdiction of the "Other Business Entity" was changed, the state or country aws of which it is now organized, formed or incorporated:
N/A	·
	me of the Florida Limited Liability Company as set forth in the attached f Organization:
LIBBY MAI	D, LLC.
	(Enter Name of Florida Limited Liability Company)
5. If not e	ffective on the date of filing, enter the effective date:

VISION OF CORPORALI

Signed this 22 day of MAY	20 <u>09</u>		
Signature of Member or Authorized Representa	ntive of Limited Liability Compan	<u>y:</u>	
Signature of Member or Authorized Representative Printed Name: JAIRO CARVALHO	Title: MGRM	æ#	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	.1	
Signature:	3		
Printed Name: JAIRO CARVALHO	Title: PRESIDENT		
Signature: Nayara OLIVEIRA	Title: V. PRESIDENT		
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Signature:Printed Name:	Title:	<del></del>	
Signature:			
Printed Name:	_ Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	corporator must sign.		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liability 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)	09 HAY 29	SECRETARY DIVISION OF O

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na The name of the L	<b>me:</b> .imited Liability Comp	any is:	
LIBBY MAID (Must end with the word "LLC.")	· · · · · · · · · · · · · · · · · · ·	," the abbi	reviation "L.L.C.," or the designation
ARTICLE II - Ac The mailing addre Liability Company	ss and street address of	the pri	ncipal office of the Limited
Principal Office	Address:		Mailing Address:
5401 S.KIRKMAN F ORLANDO, FL 328	· · · · · · · · · · · · · · · · · · ·	<b>#</b>	P.O. BOX 618158 ORLANDO, FL 32861
Signature: (The Limited Liability Cindividual or another business entity with an	0 0	vn Register	Office, & Registered Agent's red Agent. You must designate an gistered agent are:
	JAIRO CARVALHO		
	6480 RANELAGH DI	Name R UNIT 1	108
	Florida street address	s (P.O. I	Box NOT acceptable)
	ORLANDO		FL 32835
	City	y, 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

SECRETARY OF STATE DIVISION OF CORPORATIONS

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

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	JAIRO CARVALHO
	6480 RANELAGH DR UNIT 108
	ORLANDO, FL 32835
	ONLANDO, I E 02000
MGR	NAYARA OLIVEIRA
	6480 RANELAGH DR UNIT 108
	ORLANDO, FL 32835
	***
· · · · · · · · · · · · · · · · · · ·	
	(Use attachment if necessary)
	(Ose attachment if necessary)
LE V: Effective date, if other the	
ective date: 1) cannot be pric	nan the date of filing: (OPTIONAL) or to nor more than 90 days after the date this
ective date: 1) cannot be pricent is filed by the Florida Depart	nan the date of filing: (OPTIONAL)
ective date: 1) cannot be pricent is filed by the Florida Department of the attack in the attack isted therein.)	(OPTIONAL) or to nor more than 90 days after the date this artment of State; AND 2) must be the same as
ective date: 1) cannot be pricent is filed by the Florida Departive date listed in the attaclisted therein.)  REQUIRED SIGNATURE:	(OPTIONAL) or to nor more than 90 days after the date this artment of State; AND 2) must be the same as hed Certificate of Conversion, if an effective
ective date: 1) cannot be prion to the first of the florida Departure date listed in the attaclisted therein.)  REQUIRED SIGNATURE:	(OPTIONAL) or to nor more than 90 days after the date this artment of State; AND 2) must be the same as
ective date: 1) cannot be prion to is filed by the Florida Departive date listed in the attaclisted therein.)  REQUIRED SIGNATURE:  Signature of a member or  (In accordance with section of this document constitutes)	(OPTIONAL) or to nor more than 90 days after the date this artment of State; AND 2) must be the same as hed Certificate of Conversion, if an effective
rective date: 1) cannot be prior to still the florida Department of a member or of this document constitutes.	nan the date of filing:  (OPTIONAL)  or to nor more than 90 days after the date this artment of State; AND 2) must be the same as hed Certificate of Conversion, if an effective an authorized representative of a member.  1 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury
ective date: 1) cannot be prion to is filed by the Florida Departive date listed in the attack isted therein.)  REQUIRED SIGNATURE:  Signature of a member or  (In accordance with section of this document constitutes that the factor of the section	(OPTIONAL) or to nor more than 90 days after the date this artment of State; AND 2) must be the same as hed Certificate of Conversion, if an effective an authorized representative of a member. In 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury acts stated herein are true.)
ective date: 1) cannot be prion to is filed by the Florida Departive date listed in the attack isted therein.)  REQUIRED SIGNATURE:  Signature of a member or  (In accordance with section of this document constitutes that the factor of the section	(OPTIONAL) or to nor more than 90 days after the date this artment of State; AND 2) must be the same as hed Certificate of Conversion, if an effective an authorized representative of a member. In 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury acts stated herein are true.)
ective date: 1) cannot be price to the filed by the Florida Departive date listed in the attack isted therein.)  REQUIRED SIGNATURE:  Signature of a member or  (In accordance with section of this document constitutes that the father than	(OPTIONAL) or to nor more than 90 days after the date this artment of State; AND 2) must be the same as hed Certificate of Conversion, if an effective an authorized representative of a member.  1 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury acts stated herein are true.)

Page 2 of 2