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2009 JUN 22 PH 1: 03
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EXAMINER

Law Offices of

GONANO & HARRELL

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS ATTORNEYS AND COUNSELORS AT LAW

DOUGLAS E. GONANO
Board Certified Real Estate Lawyer
email: dgonano@gh-law.com

RIVERSIDE NATIONAL BANK BUILDING 1600 South Federal Highway, Suite 200 Fort Pierce, Florida 34950-5194 Telephone (772) 464-1032 Facsimile (772) 464-0282 DANIEL B. HARRELL email: dharrell@gh-law.com

MOLLY L. ROTTINGHAUS email: mrottinghaus@gh-law.com

June 19, 2009

VIA FEDERAL EXPRESS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: CORE PM, LLC

To Whom It May Concern:

Enclosed please find the following:

- 1. Cover Letter;
- 2. Certificate of Conversion;
- 3. Articles of Organization;

Also enclosed is this firm's check in the amount of \$155.00 in payment of the filing fee and a certificate of status.

Sincerely,

Stacy E. Consalvo

Stacy E. Consalvo, Legal Assistant

SECRETARY OF STATE AND A SECRETARY OF STATE

COVER LETTER

TO:	Registration S Division of Co						
SUBJ	ect: <u>CORE</u>	PM, LLC (Name of Resulting	Florida	Limited Co	ompany)		<u>#</u>
accord	rt an "Other Bu lance with s. 60	ate of Conversion, Ar siness Entity" into a "8.439, F.S.	Florid	a Limited			
Stacy	Consalvo	•	-				
Oldey	Consulvo	(Contact Person)			-		
Gonan	o & Harrell	,					SEC
donan	o a riarreii	(Firm/Company)		<u> </u>	-		유유 및
1600 0	S. Federal Highwa	• • • •					TAR ASS
1000 3	s. rederai mignwa	(Address)			••		EEC P
Fort Pi	ierce, FL 34950 (C	City, State and Zip Code)			_		2009 JUN 22 PH 1: 03 SECRETARY OF STATE FALLAHASSEE, FLORIO
For fu	rther information	on concerning this mat	tter, pl	ease call:			, , ,
Stacy	Consalvo		at (772) 464-1	1032, ext 1001	
	(Name of Contact	ct Person)		(Area Code		ytime Telephone	Number)
Enclos	sed is a check for	or the following amou	nt:				
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles anization)	\$155.00 Filing Fees and Certificate of Status		80.00 Filing Certified Cop		\$185.00 Filin Certified Copy, Certificate of St	and
Regist Divisi Cliftor 2661 I	cet Address tration Section on of Corporati n Building Executive Center tassee, FL 3236	ons er Circle		Registr Division P. O. E	ration S on of C Box 632	ADDRESS: Section orporations 27 FL 32314	

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.

1. The name of the "Other Business Entity" immediately prior to the filing of this	
Certificate of Conversion is:	,
CORE PM, LLC FE	
(Enter Name of Other Business Entity)	
AS	
2. The "Other Business Entity" is a New York limited liability company	
(Enter entity type. Example: corporation, limited partnership, sole proprietorship,	ر بر
general partnership, common law or business trust, etc.)	n N
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first organized, formed or incorporated under the laws of New York	71
(Enter state, or if a non-U.S. entity, the name of the country)	
on June 27, 2008	
(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:	
N/A	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
CORE PM, LLC	
(Enter Name of Florida Limited Liability Company)	
5. If not effective on the date of filing, enter the effective date: N/A	
(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; <u>AND</u> 2) must be the same as the effective date is listed in the attached Articles of Organization, if an effective date is listed therein.)	ıe

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S. Series	-

Signed this 19th day of June	
Signature(s) on behalf	[See below for required signature(s).]
Signature: Multi- (Multi-	TV-1 Authorized Assat
Printed Name: Douglas E. Gonano, Esquire	Title: Authorized Agent
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature: MW (WWW)	
Printed Name: Douglas E. Gonano, Esquire	Title: Authorized Agent
Signature:	
Printed Name:	Title:
Signature:Printed Name:	SE VAL
Printed Name:	Title: Title: Title:
Signature:	TAR IASS
Printed Name:	Title:
Signature:	OF S
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Certificate of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy: Certificate of Status:	\$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:	
CORE PM, LLC	0
(Must end with the words "Limited Liability Company," the abb "LLC.")	reviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of the pri Liability Company is:	
Principal Office Address:	Mailing Address: Mailing Address: 1016 Diamond Head Way
1016 Diamond Head Way Palm Beach Gardens, FL 33418	1016 Diamond Head Way Palm Beach Gardens, FL 33418
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Registe individual or another business entity with an active Florida registration.)	P
The name and the Florida street address of the re	egistered agent are:
Douglas E. Gonano, Esquire	
Name	
1600 S. Federal Highway, Su	uite 200
Florida street address (P.O. l	Box NOT acceptable)
Fort Pierce	FL 34950
City, State	, and Zip
Having been named as registered agent and to	accent service of process for the

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.8.

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	Timothy R. Conley 1016 Diamond Head Way Palm Beach Gardens, FL 33418
	2009 JUN 22 SECRETARY TALLAHASSE
ARTICLE V: Effective date, if other than the	(Use attachment if necessary)
(The effective date: 1) cannot be prior to a document is filed by the Florida Department the effective date listed in the attached Codate is listed therein.) REQUIRED SIGNATURE:	ent of State; AND 2) must be the same as
- Klub-Cd	thorized representative of a member.
of this document constitutes an af that the facts st	408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.)

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