# L0900064440

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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06/30/09--01026--014 \*\*150.00

09 JUN -30 PH 2: 39

S. HAWKES

JUL 2 - 2009

EXAMINER

### **COVER LETTER**

TO: Registration Section Division of Corporations

OUNGELL.			<b>-</b>	
	(Name of Resulting	Florida Limited Company	) SOFLA ent. L.L.C	
	usiness Entity" into a '	rticles of Organization, "Florida Limited Liabi	, and fees are submitted to lity Company" in	
Please return all con	respondence concernin	ng this matter to:		
ARTHU		TA		
	(Contact Person)			
5	OFLA cot			
	(Firm/Company)			
	yw 10+h Rd			
	(Address)			
MIADI	FL 3310	· <b>c</b> .		
	City, State and Zip Code)	3-1		
For further informati	on concerning this ma	tter, please call:		
ARTHUR	). COSTA	at (305 ) 50	25.7081	
(Name of Contr	act Person)		aytime Telephone Number)	
Enclosed is a check to	for the following amou	ınt:		
\$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	S185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES	S:	MAILING A	ADDRESS:	
Registration Section		Registration :		
Division of Corporat	ions	Division of C	Corporations	
Clifton Building		P. O. Box 633	_	
2661 Executive Cent Tallahassee, FL 323		Tallahassee, 1	FL 32314	
Languassee, FL 323	V i			

#### **Certificate of Conversion** For

## "Other Business Entity"

Into

#### Florida Limited Liability Company

90 M 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:
SOFLA ENTERTAINMENT INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a  (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 POSOCO (Enter state, or if a non-U.S. entity, the name of the country)
on 10/24/200% (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:
SOFLA ent. LL.C.
(Enter Name of Florida Limited Liability Company)
5. If not affective on the data of Clina, outputh a effective data.
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 day of		
Signature of Member or Authorized Represent	ative of Limited Liability Company:	
Signature of Member or Authorized Representative Printed Name: ARTHUR W. COSTA	Title: MANAGER	<del>-</del>
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]	
Signature:	mu	_
Printed Name: ARTHUR W. COSTA	Title: DIRECTOR	-
Signature: Printed Name:	Tral -	
Printed Name:	. Title:	
Signature:Printed Name:	Title	_
Signature: Printed Name:	Title	-
Signature: Printed Name:	Title:	<del></del>
Signature:Printed Name:	Title:	<b>-</b>
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:	26 AM 60
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	?	
All others: Signature of an authorized person.	577.49 - 11.4 -	12 12 13
Fees:		
Certificate of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$125.00	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
The name of the Limited Liability Company is:	
·	40 9
SOCIALIC	
(Must end with the words "Limited Liability Company," the abbr	eviation "L.L.C.," or the designation
"LLC.")	خېچ د پېښې ا روپ دې
ADTICLE II Address	
ARTICLE II - Address: The mailing address and street address of the print	scinal office of the Limited
Liability Company is:	Topul Office of the Danked
Principal Office Address:	Mailing Address:
18803 NW 10+ Rd.	18803 NW 10+ Rd.
MIAMI, FL 33169	MIAMI, FL 93169
ARTICLE III - Registered Agent, Registered C Signature: (The Limited Liability Company cannot serve as its own Register individual or another business entity with an active Florida registration.)	
The name and the Florida street address of the reg	gistered agent are:
ARTHUR W. COS	
ARTHUR W. COS Name	<u>TA</u>
ARTHUR W. COS Name 18803 NW. 10	TA Rd.
ARTHUR W. COS Name	TA Rd.
ARTHUR W. COS  Name  18803 NW. 10+  Florida street address (P.O. E	TA  Box NOT acceptable)
ARTHUR W. COS Name 18803 NW. 10	TA  Box NOT acceptable)

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:
mgr	ARTHUR W. COSTA
	18803 NW. 10+7 Rd.
	MIAMI, FL 33169
<del> </del>	<u> </u>
CLE V: Effective date, if other than the fective date: 1) cannot be prior to 1	e date of filing: (OPTIONAL) nor more than 90 days after the date this
ffective date: 1) cannot be prior to nent is filed by the Florida Departme fective date listed in the attached C listed therein.)	(OPTIONAL)
ffective date: 1) cannot be prior to nent is filed by the Florida Department fective date listed in the attached C	(OPTIONAL) nor more than 90 days after the date this ent of State; <u>AND</u> 2) must be the same as
ffective date: 1) cannot be prior to nent is filed by the Florida Departme fective date listed in the attached ( listed therein.)  REQUIRED SIGNATURE:	(OPTIONAL) nor more than 90 days after the date this ent of State; <u>AND</u> 2) must be the same as
ffective date: 1) cannot be prior to a sent is filed by the Florida Department fective date listed in the attached Collisted therein.)  REQUIRED SIGNATURE:  Signature of a member or an au  (In accordance with section 608. of this document constitutes an af	(OPTIONAL) nor more than 90 days after the date this ent of State; <u>AND</u> 2) must be the same as Certificate of Conversion, if an effective
ffective date: 1) cannot be prior to a sent is filed by the Florida Department fective date listed in the attached Collisted therein.)  REQUIRED SIGNATURE:  Signature of a member or an au  (In accordance with section 608. of this document constitutes an af	(OPTIONAL) nor more than 90 days after the date this ent of State; AND 2) must be the same as Certificate of Conversion, if an effective ethorized representative of a member.  408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.)
ffective date: 1) cannot be prior to a sent is filed by the Florida Department fective date listed in the attached Collisted therein.)  REQUIRED SIGNATURE:  Signature of a member or an au  (In accordance with section 608. of this document constitutes an after that the facts st	(OPTIONAL) nor more than 90 days after the date this ent of State; AND 2) must be the same as Certificate of Conversion, if an effective ethorized representative of a member.  408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.)
ffective date: 1) cannot be prior to react is filed by the Florida Department fective date listed in the attached Collisted therein.)  REQUIRED SIGNATURE:  Signature of a member or an au  (In accordance with section 608. of this document constitutes an after that the facts start and the facts are also a	(OPTIONAL) nor more than 90 days after the date this ent of State; AND 2) must be the same as Certificate of Conversion, if an effective of the conversion o

\$ 5.00 Certificate of Status (Optional)
Page 2 of 2