

LD9000090287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

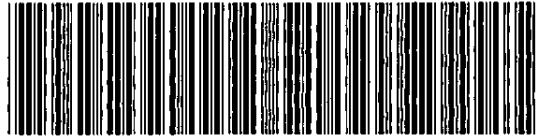
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800159837628

09/17/09--01018--021 **180.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

SEP 18 2009

EXAMINER

**PETER PREVITI ESQ.
NELSON TARACIDO, ESQ.**

A PROFESSIONAL ASSOCIATION OF ATTORNEYS
SUNSET BUSINESS PLAZA
5825 SUNSET DRIVE - SUITE 210
SOUTH MIAMI, FLORIDA 33143

TELEPHONE (305) 662-9504

FACSIMILE (305) 662-6967

September 15, 2009

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Converting Corporation - Microshred, LLC

Dear Sir/Madam:

Enclosed please find our check number 10448 in the amount of \$180.00 as well as the documentation necessary with regard to the conversion of the above referenced limited liability company.

Please provide my office with a certified copy of same. I have enclosed a self addressed, stamped envelope for your convenience.

Sincerely,

Peter Previti/ds

Peter Previti, Esquire

PP/ds

enc.

SIGNED IN MR. PREVITI'S
ABSENCE TO AVOID DELAY.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Microshred LLC

(Name of Resulting Florida Limited Company)

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

Peter Previti
(Contact Person)

(Firm/Company)

5825 Sunset Drive, Ste 210
(Address)

Miami, Fl 33143
(City, State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Peter Previti at (305) 662-9504
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

2. The "Other Business Entity" is a Corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on 08/19/2003
(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:**

Microshred, LLC
(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 listed therein.)

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TALLAHASSEE, FLORIDA

Signed this 14 day of Sept 2009

Signature of Member or Authorized Representative of Limited Liability Company:

Signature of Member or Authorized Representative: [Signature]
Printed Name: Rosemary Tsohn Title: Member

Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: [Signature]
Printed Name: Rosemary Tsohn Title: President

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

| | |
|--------------------------------------------|--------------------|
| Certificate of Conversion: | \$25.00 |
| Fees for Florida Articles of Organization: | \$125.00 |
| Certified Copy: | \$30.00 (Optional) |
| Certificate of Status: | \$5.00 (Optional) |

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Microshred, LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

19593 NE 10 Avenue

Bldg 4, Bay A&B

Miami, FL 33179

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent

Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Peter Previti

Name

5825 Sunset Drive, Ste 210

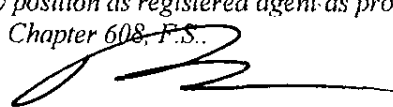
Florida street address (P.O. Box **NOT** acceptable)

Miami

FL 33143

City, 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)

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TALLAHASSEE, FLORIDA

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Rosemary Tsohn

19593 NE 10 Ave., Bldg. 4, Bay A&B

Miami, Florida 33179

MGR

Ami-Hai Tsohn

19593 NE 10 Ave., Bldg. 4, Bay A&B

Miami, Florida 33179

MGR

Nira Schlafly

19593 NE 10 Ave., Bldg. 4, Bay A&B

Miami, Florida 33179

MGR

Orly Ciechanowiecki

19593 NE 10 Ave., Bldg. 4, Bay A&B

Miami, Florida 33179

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____

(OPTIONAL)

(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 Certificate of Conversion, if an effective date is listed therein.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Rosemary Tsohn

Typed or printed 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)

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TALLAHASSEE, FLORIDA

Additional Page

Article IV: Manager(s) or Managing Member(s):

The name and address of each manager or Managing Member is as follows:

Title

Name and Address:

"MGR"= Manager

"MGRM"=Managing Member

MGR

Rina Tsohn
19593 NE 10 Avenue, Bld 4 Bay A&B
Miami, FL 33179

MGR

James Schlafly
19593 NE 10 Avenue, Bld 4 Bay A&B
Miami, FL 33179

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