(Re	questor's Name)	
(Ad	dress)	<u></u>
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DA)	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
		; .
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	· Certificate	s of Status
Sommod Sopies		,
Special Instructions to	Filing Officer:	
		

. Office Use Only

G. MCLEOD

OCT 26 2009 EXAMINER

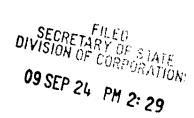


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COVER LETTER

TO: Registration Division of C					
SUBJECT: NIALI	PITHEY LLC (Name of Resulting	Floric	da Limited C	ompany)	F _
	usiness Entity" into a '		_		and fees are submitted to
Please return all corr	espondence concernin	g this	s matter to:		
NIALL PITHEY	(6 + + 1)			_	
NIALL PITHEY LLC	(Contact Person)				
	(Firm/Company)	·			
1020 SW 177TH WAY					
	(Address)			_	
PEMBROKE PINES, F	FI 33020				
	City, State and Zip Code)			_	
For further informati	on concerning this ma	tter, p	olease call:		
NIALL PITHEY		at (954) 663 4	1576
(Name of Conta	act Person)	_ `	(Area Cod	e and Da	ytime Telephone Number)
Enclosed is a check t	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 Filin Certified Co	_	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:		MAII	ING A	DDRESS:
Registration Section			Registration Section		
Division of Corporations Division of Corporations		•			
Clifton Building 2661 Executive Center Circle			P. O. Box 6327 Tallahassee, FL 32314		
Tallahassee, FL 323			i allah	assee, I	L 32314



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.

The name of the "Other Business Entity" immediately prior to the filing of this
Certificate of Conversion is:
NIALL PITHEY CORPORATION
(Enter Name of Other Business Entity)
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 07/17/2009
(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:
NIALL PITHEY LLC
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: 10/01/09
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 listed in the attached Articles of Organization, if an effective date is isted therein.)

, , , t					
Signed this 21ST day of SEPTEMBER	20 <u></u>				
Signature of Member or Authorized Representa	ative of Limited Liability Company:				
	17:1				
Signature of Member or Authorized Representativ	ë: / Kuthuy				
Printed Name: NIALL PITHEY	Title: CHAIRMAN				
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]				
Signature: Acthry Printed Name: NIAL 117HF7					
Printed Name: HILL LIZUE-	Title: CHAIR MANA!				
Timed Name.	Title Applie - Avo				
Signature:					
Signature:Printed Name:	Title:				
Signature					
Signature: Printed Name:	Title				
Fillited Name.	I me				
Signature:					
Signature:Printed Name:	Title:				
Signature:					
Signature:Printed Name:	Title				
Timed Name.	True.				
Signature:					
Signature:Printed Name:	Title:				
If Florida Corporation:					
	Officer				
Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.					
If Directors or Officers have not been selected, an in	corporator must sign.				
If Florida General Partnership or Limited Liabili	ty Partnership:				
Signature of one General Partner.					
If Florido I imited Doutneyship on I imited I inhib	to I insite d Denter analysis.				
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:				
orginatures of ALDE General Farmers.					
All others:					
Signature of an authorized person.					
Fees:					
Certificate of Conversion:	\$25.00				
· · · · · · · · · · · · · · · · · ·	• • •				
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Ontional)				
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)				
Centificate of Status.	UNIOTHULE				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Li	ne: mited Liability Company is:				
NIALL PITHE	Y LLC "Limited Liability Company," the ab	breviation	"I. I. C." or the designation		
"LLC.")	Difficult Diability Company, the ab	DI CVI alioi	D.D.C., of the designation		
ARTICLE II - Ad The mailing addres Liability Company	s and street address of the pr	incipal	office of the Limited		
Principal Office A	ddress:	<u>Mail</u>	ing Address:		
1020 SW 177TH WA	Y	1020	SW 177TH WAY		
PEMBROKE PINES.	FL 33029		BROKE PINES		
		FL 33	3029		
Signature: (The Limited Liability Coindividual or another business entity with an a	egistered Agent, Registered impany cannot serve as its own Regist ctive Florida registration.)	ered Age	nt. You must designate an		
The name and the F	lorida street address of the r	egistere	ed agent are:		
	NIALL PITHEY				
Name					
1020 SW 177TH WAY					
Florida street address (P.O. Box NOT acceptable)					
	PEMBROKE PINES	FL	33039-4830		
	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)
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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR NIALL PITHEY 1020 SW 177TH WAY PEMBROKE PINES, FL 33029 (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.) NIALL PITHEY 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)

Page 2 of 2