# L09000123486

| ·                | (Requestor's Name)       |
|------------------|--------------------------|
|                  | (Address)                |
|                  |                          |
|                  | (Address)                |
|                  | (City/State/Zip/Phone #) |
| PICK-U           | P WAIT MAIL              |
|                  | (Business Entity Name)   |
|                  | · (Document Number)      |
| Certified Copies | Certificates of Status   |
|                  |                          |

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12/30/09--01021--018 \*\*150.00

Special Instructions to Filing Officer:

L. SELLERS

DEC 31 2009

**EXAMINER** 

Office Use Only

SECRETARY OF STATE

FILED

### **COVER LETTER**

| TO:                 | Registration S<br>Division of C                                    |  |                                       |          |  |
|---------------------|--|--|---------------------------------------|----------|--|
| OI ID I             |  | •  |                                       |          |  |
| SUBJ                | ECT: Acoustic  | Art Creations, Corporation (Name of Resulting  |                                       | mpany)   |  |
| conve               |  | isiness Entity" into a "                       |                                       |          | and fees are submitted to ity Company" in                              |
| Please              | e return all corre   | espondence concernin                           | g this matter to:                     |          | ,  |
| Joseph              | Ganci  |  |                                       |          |  |
|                     |  | (Contact Person)                               |                                       |          |  |
| Acous               | tic Art Creations  | (F:/C)   |                                       | -        |  |
| 4370 (              | Daks Road 🖇 🗸  | (Firm/Company) ite 726                         |                                       |          |  |
|                     |  | (Address)                                      |                                       | -        |  |
| Davie,              | FL 33314   |  |                                       | _        |  |
|                     | ((   | City, State and Zip Code)                      |                                       |          |  |
|                     | @NewImagePOS   |  |                                       | -        |  |
| E-II                | naii Address: (to b  | e used for future annual re                    | port notifications)                   |          |  |
| For fu              | ırther informati   | on concerning this ma                          | tter, please call:                    |          |  |
| Joseph              | Ganci  |  | _at ( 954                             | ) 55768  |  |
|                     | (Name of Conta   | ct Person)                                     | (Area Code                            | and Da   | ytime Telephone Number)  |
| Enclo               | sed is a check f   | or the following amou                          | nt:                                   |          |  |
| (\$25 fo<br>& \$125 | 0.00 Filing Fees<br>or Conversion<br>of for Articles<br>anization) | \$155.00 Filing Fees and Certificate of Status | □\$180.00 Filing<br>and Certified Cop |          | ☐\$185.00 Filing Fees,<br>Certified Copy, and<br>Certificate of Status |
| STRE                | EET ADDRES   | S:   | MAIL                                  | ING A    | ADDRESS:   |
|                     | tration Section  |  | Registr                               |          |  |
|                     | on of Corporat   | ions   | Divisio<br>P. O. B                    |          | orporations  |
|                     | n Building<br>Executive Cent                                       | er Circle                                      |                                       |          | FL 32314   |
| Tallal              | nassee, FL 323   |  |                                       | <b>_</b> | · _ · <del> ·</del>  |
| 4.42                |  |  | ••                                    |          |  |

#### **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)  |
|------------------------------|--|
| 2. The "Oth                  | er Business Entity" is a corporation   |
|                              | Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)             |
| first organize               | ed, formed or incorporated under the laws of Florida   |
| <b>G</b>                     | (Enter state, or if a non-U.S. entity, the name of the country)  |
| on January 21,<br>(Enter dat | , 1993<br>te "Other Business Entity" was first organized, formed or incorporated   |
| -                            | sdiction of the "Other Business Entity" was changed, the state or country ws of which it is now organized, formed or incorporated: |
|                              | of the Florida Limited Liability Company as set forth in the attached Organization:  |
| Acoustic Art C               | reations LLC   |
|                              | (Enter Name of Florida Limited Liability Company)  |
| E 16 : 60-                   | ective on the date of filing, enter the effective date: 12/31/2009   |

Page 1 of 2

listed therein.)

FILED

| Signed this 28th day of December  | 20.09                                       |
|---|---|
| Signature of Member or Authorized Repre   | sentative of Limited Liability Company:     |
| Signature of Member or Authorized Represen  | tative:                                     |
| Signature of Member or Authorized Represen Printed Name: Joseph Ganci                   | Title:/MGRMBR //                            |
| Signature(s) on behalf of Other Business Ent  | ity: [See below for required signature(s).] |
| Signature: Printed Name: Joseph Ganci   |   |
| Printed Name: Joseph Ganci  | Title: Director                             |
|   |   |
| Signature: V Printed Name:  | Title                                       |
| Timed Ivaine.   | Title.                                      |
| Signature:Printed Name:   |   |
| Printed Name:   | Title:                                      |
| Signature:  |   |
| Printed Name:   | Title:                                      |
| S: .  |   |
| Signature:Printed Name:   |   |
| Timed Nume.   |   |
| Signature:  |   |
| Printed Name:   | Title:                                      |
| If Florida Corporation:   |   |
| Signature of Chairman, Vice Chairman, Directo   | r, or Officer.                              |
| If Directors or Officers have not been selected,  | an Incorporator must sign.                  |
| If Florida General Partnership or Limited Li  | ability Partnershin.                        |
| Signature of one General Partner.   | aumty rathership.                           |
| ·   | •   |
| If Florida Limited Partnership or Limited Li Signatures of <u>ALL</u> General Partners. | ability Limited Partnership:                |
| All others: Signature of an authorized person.  |   |
| Fees:   |   |
| Certificate of Conversion:  | \$25.00                                     |

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name | • |
|------------------|---|
|------------------|---|

The name of the Limited Liability Company is:

Acoustic Art Creations 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:**

**Mailing Address:** 

4370 Oaks Road, Suite 726, Davie, FL 33314

1370 Oaks Rd, #726, Davie, FL 3 1 3 3 3 1 4

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's 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:

Name Name

4370 Oaks Road, Suite 726

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

Davie

FL 33314

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 futies, and I am familiar with and accept the obligations of my position as registered agent as provided for in

Registered Agent's Signature (REQUIRED)

CONTINUED)
Page 1 of 2

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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:

|  | Name and Address:   |
|--|---|
| "MGR" = Manager "MGRM" = Managing Member   |   |
| MORW - Managing Member   |   |
| MGRM   | Joseph Ganci  |
|  | 4370 Oaks Road, Suite 726, Davie, FL 3331   |
|  | -   |
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| <del></del>  |   |
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| The state of the s |   |
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|  |   |
|  |   |
|  | (Use attachment if necessary)   |
| <b>LE V:</b> Effective date, if other than   | the date of filing: 12/31/2009  |
|  | the date of filing: 12/31/2009 (OPTIONAL) to nor more than 90 days after the date this  |
| fective date: 1) cannot be prior tent is filed by the Florida Departective date listed in the attached listed therein.)  | the date of filing: $\frac{12/31/2009}{\text{(OPTIONAL)}}$ .  |
| fective date: 1) cannot be prior tent is filed by the Florida Departective date listed in the attached listed therein.)  REQUIRED SIGNATURE:   | the date of filing: 12/31/2009 (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as  |
| fective date: 1) cannot be prior to ent is filed by the Florida Depart ective date listed in the attached listed therein.)  REQUIRED SIGNATURE:  Signature of a member or an of this document constitutes and the entire terms of  | the date of filing: 12/31/2009 (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as a Certificate of Conversion, if an effective   |
| fective date: 1) cannot be prior to ent is filed by the Florida Depart ective date listed in the attached listed therein.)  REQUIRED SIGNATURE:  Signature of a member or an of this document constitutes and the entire terms of  | the date of filing: 12/31/2009 (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as a Certificate of Conversion, if an effective authorized representative of a member.  08.408(3), Florida Statutes, the execution affirmation under the penalties of perjury |

\$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