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

Special Instructions to Filing Officer:

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EXAMINER

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SECRETARY OF STATE FLORIDA

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COVER LETTER

TO: Registration Division of C							
SUBJECT: Hollywo	od Associates LLC						
		Florida Limited Co	mpany)		·-		
	cate of Conversion, Au usiness Entity" into a ' 08.439, F.S.)	
Please return all corr	respondence concernin	g this matter to:					
Gyorgy Katz							
	(Contact Person)		•				
Hollywood Associates L	LC		_				
	(Firm/Company)				<u>≯</u>	201	
500 BAYVIEW DRIVE	E, No. 1928				CAL LAH	DF.	
	(Address)		-		IAS.	62	
Sunny Isles, FL 33160					SEE	_	
	City, State and Zip Code)		•		1. S.	10 FEB - 1 PM 4: 3	(
			_		13.7	4:	ţ
E-mail Address: (to l	be used for future annual re	eport notifications)			Diri	37	
For further informati	ion concerning this ma	atter, please call:					
Gyorgy Katz		at (305) 948-662	.2			
(Name of Cont	act Person)		and Dayt	ime Telephone 1	Number)		
Enclosed is a check	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 and Certified Cop	y (■\$185.00 Filin Certified Copy, Certificate of Sta	and		
STREET ADDRES	SS:	MAIL	ING AD	DRESS:			
Registration Section		Registr	ation Se	ction			
Division of Corporat	tions			porations			
Clifton Building 2661 Executive Cent	ter Circle		ox 6327	. 32314			
Tallahassee, FL 323		i anana	.0000, I L	, 52517			

FILED

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: Hollywood Associates Inc.	<u> </u>	20
(Enter Name of Other Business Entity)	<u> </u>	10 F
2. The "Other Business Entity" is a corporation	HAS	2010 FEB - I
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	HOF OF	PH 4: 3
first organized, formed or incorporated under the laws of Florida	ORI ORI	÷.
(Enter state, or if a non-U.S. entity, the name of the country)) - -	37
on 10/14/1999		
(Enter date "Other Business Entity" was first organized, formed or incorpo	rated)	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or cour under the laws of which it is now organized, formed or incorporated:	ıtry 	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	i	
Hollywood Associates LLC	•	
(Enter Name of Florida Limited Liability Company)		
5. If not effective on the date of filing, enter the effective date: 1/1/2010	*	
(The effective date: 1) cannot be prior to nor more than 90 days after the date document is filed by the Florida Department of State; <u>AND</u> 2) must be the sar effective date listed in the attached Articles of Organization, if an effective date listed therein.)	ne as th	ie

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Signed this 29 day of January	20_10
Signature of Member or Authorized Representa	tive of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: Gyorgy Katz	E: Title: WERM
Signature(s) on behalf of Other Business Entity:	
Signature:	
Printed Name: Gybrgy Natz	Title: President
Signatura	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	_ Title:
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Signature:Printed Name:	Title:
	Y T1
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Control of Chairman, Director, or Chairman,	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
Signature of one General Farther.	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	LICI	ΕI	- Na	me:

The name of the Limited Liability Company is:

Hollywood Associates 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:
500 Bayview Drive, No. 1928	500 Bayview Drive, No. 1928
Sunny Isles, FL 33160	Sunny Isles, FL 33160 925 1
	T TK
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agént's
Signature:	≥≥ ::
(The Limited Liability Company cannot serve as its individual or another	s own Registered Agent. You must designate an re-
business entity with an active Florida registration.)

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

Gyorgy Katz	
	Name
500 Bayview Drive, ne	o. 1928
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Sunny Isles	FL 33160
(City. State, and Zin

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:

"MGR" = Manager "MGRM" = Managing Member	
MGRM	Gyorgy Katz
	500 Bayview Drive, No. 1928
	Sunny Isles, FL 33160
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	(OPTIONAL)
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of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2