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(Rec	uestor's Name)	
(Add	ress)	
	1000)	
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(City	/State/Zip/Phone	∌ #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
·····		
Special Instructions to F	iling Officer:	

Office Use Only



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SECRETARY OF STATE

D. BRUCE

FEB 9 2010

EXAMINER

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Ewing On							
	(Name of Resulting	Florida Lin	nited Cor	mpany)			
	eate of Conversion, Ar siness Entity" into a " 08.439, F.S.		_	-			ted to
Please return all corre	espondence concerning	g this mat	ter to:				
Dennis R. Bedard							
	(Contact Person)						
	(Firm/Company)		····· · · · · · · · · · · · · · · · ·	-			
1717 North Bayshore Dri				•			
	(Address)					$\vec{\Sigma}_{\epsilon}$	
Miami, Florida 33132							5
(0	City, State and Zip Code)					HANNET TOTAL	E
dennisbedard@mac.com						AR	2
E-mail Address: (to be	e used for future annual re	port notifica	tions)			Ϋ́O	
For further information	on concerning this ma	tter, pleas	e call:			F STA	AH III: 55
Dennis R. Bedard		at (305)530079	95	IDA MOA	55
(Name of Conta	ct Person)	(Ar	ea Code	and Day	time Telephor	ne Numb	er)
Enclosed is a check for	or the following amou	nt:					
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.0 and Certif			\$185.00 Fi Certified Cop Certificate of	y, and	s,
STREET ADDRESS	S:	!	MAILI	NG A	DDRESS:		
Registration Section		1	Registra	ation S	ection		
Division of Corporati	ons	1	Divisio	n of Co	orporations		
Clifton Building			P. O. B				
2661 Executive Center Tallahassee, FL 3230			Fallaha:	ssee, F	L 32314		

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.

	pration	
	(Enter Name of Other Business Entity)	
2. The "Other	Business Entity" is a Florida Corporation \$\frac{40900051839}{}.	
	nter entity type. Example: corporation, limited partnership,	
	general partnership, common law or business trust, etc.)	
first organized,	, formed or incorporated under the laws of Florida	
(1	Enter state, or if a non-U.S. entity, the name of the country)	
on June 15, 2009	LAS A	
	"Other Business Entity" was first organized, formed or incorporated)	
3. If the jurisd under the laws	iction of the "Other Business Entity" was changed, the state or country of which it is now organized, formed or incorporated:	
4. The name o Articles of Or	f the Florida Limited Liability Company as set forth in the attached ganization:	
Ewing One, LLC		
	(Enter Name of Florida Limited Liability Company)	
5. If not effect	ive on the date of filing, enter the effective date:	

Signed this 3rd day of February	2010	
Signature of Member or Authorized Representa	ative of Limited Liability Company:	
Signature of Member or Authorized Representative Printed Name: Gerald Langeron	e:	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]	
Signature: Signature: Printed Name: Gerald Langeron	Title: President	
Signature: Printed Name:		
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.		
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: 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

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Compan" LLC.")	y," the abbreviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of Liability Company is:	of the principal office of the Limited
Liability Company is.	
Principal Office Address:	Mailing Address:
1717 North Bayshore Drive, Unit 2934	Same
Miami, Florida 33132	
· · · · · · · · · · · · · · · · · · ·	
ARTICLE III - Registered Agent, Registered Education Signature: (The Limited Liability Company cannot serve as its of individual or another business entity with an active Florida registration.) The name and the Florida street address Thibaut Rives De Lavays	of the registered agent are:
Intotal Rives De Lavaye	Name
1717 North Bayshore Dr	
Florida street addres	ss (P.O. Box <u>NOT</u> acceptable)
Miami	FL33132
Ci	ty, State, and Zip
Having heen named as registered ager	nt and to accept service of process for the

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Gerald Langeron
	116 BD Maurice Barres
	Neuilly Sur Seine, FR 75116 XX
MCDM	Thibaut Rives De Lavaysse
MGRM	
	1717 North Bayshore Drive, Unit 2934
	Miami, Florida 33132
	P
	AND THE PROPERTY OF THE PROPER
	
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the	· Si
THE TELEVISION OF THE	(OPTIONAL)
(The effective date: 1) cannot be prior to no document is filed by the Florida Department the effective date listed in the attached Co date is listed therein.)	nt of State; AND 2) must be the same as
REQUIRED SIGNATURE:	
	1
a. Jan Sen	
Signature of a member or an aut	horized representative of a member.
of this document constitutes an aff	08(3), Florida Statutes, the execution irmation under the penalties of perjury ted herein are true.)
Gerald Langerson	
Typed or print	ed 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