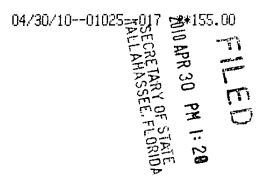
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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T. CLINE
MAY - 3 2010
EXAMINER

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: LUIS/MICALI LTD.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Partnership
(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 June 16th, 2004
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: NA
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LUIS/MICALI 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.)

Signed this29th_day of April	20_10
Signature of Member or Authorized Representa	tive of Limited Liability Company:
Signature of Member or Authorized Representative	
Printed Name: Michael A. Luis Mess.	Till Drog of Managing Morbor
Printed Name: MIChael A. Luis Pres.	_ Inte: Pres or Managing Member
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]
Signature:	
Del co l N	The state of the s
Printed Name: Nichael/ A. Forts	Title: President of General Partner
Signature: Signature: Signature:	
Printed Name: John S. Micali	Title: Pres of General Partner
	
Signature:	
Printed Name:	Title:
	•
Signature:	T _S 0
Printed Name:	Title:
Filmed Name.	Title:
0.	
Signature:	
Printed Name:	Title.
	MOR RE
Signature:	<u> </u>
Printed Name:	Title: 完定 %
If Florida Corporation:	77
Signature of Chairman, Vice Chairman, Director, or C	Officer
If Directors or Officers have not been selected, an Inc	orporator must sign.
If Florida General Partnership or Limited Liabilit	<u>y Partnership:</u>
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
	#25 AA
Certificate of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

LUIS/MICALI, LLC.

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2728 SW 24th Avenue

PostOffice Box 331410

Suite C Miami, Florida 33133 Miami, Florida 3323

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate and individual or another

business entity with an active Florida registration.)

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

Michael A. Luis

Name

2728 SW 24th Avenue, Suite C Florida street address (P.O. Box NOT acceptable)

Miami

FL33133

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 (REOUIRED)

(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	Luis Development, Inc. Post:Office Box 331410 Miami, Florida 33233	
MGRM	Allied Concrete Restoration, 8203 SW 124th Street	Inc.
· · · · · · · · · · · · · · · · · · ·	Miami, Florida 33186	
	ZOIO I	
		WAR
ARTICLE V: Effective date, if other than the d	(OPTIONAL) 第五 💫	erenta nematik
(The effective date: 1) cannot be prior to not document is filed by the Florida Department the effective date listed in the attached Cerdate is listed therein.)	of State; AND 2) must be the same as	
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.)

Michael A. Luis Pres of Managing Member

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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