

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1 SELLED
L. SELLERS
MAY 14 2010
EXAMINER

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SECRETARY OF STATE TALLAILASSEE. FLORIDA

COVER LETTER

то:	Registration S Division of C				
SUBJ	ECT: MPM HL	AWASSEE LLC			
		(Name of Resulting	Florida Limited Co	mpany)	A CONTRACT OF THE CONTRACT OF
conve		isiness Entity" into a "	_		and fees are submitted to ty Company" in
Please	return all corre	espondence concerning	g this matter to:		
LIGIA	M. ESPINOSA				
		(Contact Person)		-	
МРМ І	HIAWASSEE INC				
		(Firm/Company)		_	
5691 S	. SEMORAN BV	SUITE B			
		(Address)	<u> </u>	•	
ORLA	NDO, FL 32822				
	((City, State and Zip Code)		-	
AECO	RPORATIONS@	YAHOO.COM			
E-ir	nail Address: (to b	e used for future annual re	port notifications)	-	
For fu	rther information	on concerning this mat	tter, please call:		
LIGIA	M. ESPINOSA		_at (<u>407</u>	797-80)76
	(Name of Conta	ct Person)		and Day	ytime Telephone Number)
Enclos	sed is a check f	or the following amou	nt:		
(\$25 for & \$125	0.00 Filing Fees r Conversion for Articles nization)	☑\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 27, 2010

LIGIA M. ESPINOSA 5691 S. SEMORAN BLVD., STE. B ORLANDO, FL 32822

SUBJECT: MPM HIAWASSEE LLC Ref. Number: W10000020433

We have received your document for MPM HIAWASSEE LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 310A00010390

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	ner Business Entity" is a CORPORATION
	(Enter entity type. Example: corporation, limited partnership,
	general partnership, common law or business trust, etc.)
first organiz	ed, formed or incorporated under the laws of FLORIDA
•	(Enter state, or if a non-U.S. entity, the name of the country)
on 10-31-200	8
	ite "Other Business Entity" was first organized, formed or incorporated)
If the juri	ediction of the "Other Rucinece Entity" was changed, the state or country
under the lav	isdiction of the "Other Business Entity" was changed, the state or country ws of which it is now organized, formed or incorporated:
N/A 4. The name	
N/A 4. The name Articles of (e of the Florida Limited Liability Company as set forth in the attached Organization:
N/A 4. The name	e of the Florida Limited Liability Company as set forth in the attached Organization:

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re(s).]

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MPM HIAWASSEE LLC

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

6601 OLD WINTER GARDEN RD # 103

ORLANDO, FL 32835

6601 OLD WINTER GARDEN RETORLANDO, FL 32806

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:

LIGIA M, ESPINOSA

Name 6601 OLD WINTER GARDEN RD #103

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

ORLANDO FI 3283

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 10 MAY 12 PH 12: 16

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 Mem	Name and Address:
MGRM	LIGIA M. ESPINOSA
	6601 OLD WINTER GARDEN RD #10
	ORLANDO, FL 32835
MGRM	JORGE I. ARANGO
	6601 OLD WINTER GARDEN RD #10
	ORLANDO, FL 32835
	/T.T
	(Use attachment if necessary)
fective date: 1) cannot be point is filed by the Florida Dective date listed in the atta	•
Fective date: 1) cannot be part is filed by the Florida Dective date listed in the attainted therein.) REQUIRED SIGNATURE:	than the date of filing: (OPTIONAL) rior to nor more than 90 days after the date epartment of State; AND 2) must be the same ached Certificate of Conversion, if an effective state of Conversion if an effective state of Conversion.
ent is filed by the Florida Dective date listed in the attaisted therein.) REQUIRED SIGNATURE: Signature of a member of this document constitute.	than the date of filing: (OPTIONAL) rior to nor more than 90 days after the date epartment of State; AND 2) must be the same ached Certificate of Conversion, if an effect of an authorized representative of a member on 608.408(3), Florida Statutes, the execution
fective date: 1) cannot be part is filed by the Florida Dective date listed in the attainment of the file of this document constitute.	(OPTIONAL) rior to nor more than 90 days after the date epartment of State; AND 2) must be the same ached Certificate of Conversion, if an effect or an authorized representative of a member on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury

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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