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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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10 JUN 25 AM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. G. G. JUN 28 2010

**GUTTENMACHER & BOHATCH, P.A.**

ATTORNEYS AT LAW

JOHN S. BOHATCH  
EDWARD P. GUTTENMACHER  
KATALINA PEÑARANDA  
ERIC SATIN\*

PRACTICE LIMITED TO  
PROBATE, ESTATE PLANNING,  
BUSINESS PLANNING & TAXATION

\*LL.M. TAXATION

WEALTH PLANNING &  
TRANSACTIONAL ALLIANCE  
WITH ADAMS GALLINAR, P.A.

7301 SOUTHWEST 57TH COURT  
SUITE 560  
SOUTH MIAMI, FLORIDA 33143

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GULFVIEW POINTE  
2647 GULFVIEW DRIVE  
KEY WEST, FLORIDA 33040

TELEPHONE (305) 294-1521  
TELEFAX (305) 292-4016

PLEASE REPLY TO:  
SOUTH MIAMI

June 24, 2010

**Via Federal Express**

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

**RE: CARIB SALES, INC. (CONVERSION TO LLC)**

To Whom It May Concern:

Enclosed please find a Certificate of Conversion and Articles of Organization for the above referenced entity, along with a check in the amount of \$150.00 representing the fee for such. Once complete, please forward the letter of confirmation of conversion to us in the self-addressed stamped envelope provided.

Should you have any questions, or need anything further, please do not hesitate to contact us.

Sincerely,

GUTTENMACHER & BOHATCH, P.A.

*J. S. Bohatch for*  
JOHN S. BOHATCH, ESQ..  
*Signed in his absence*  
*to avoid delay.*

JSB/jdf  
Encl.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CARIB SALES, LLC

(Name of Resulting Florida Limited Company)

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

JOHN S. BOHATCH, ESQ.

(Contact Person)

GUTTENMACHER & BOHATCH, P.A.

(Firm/Company)

7301 SW 57TH COURT, SUITE 560

(Address)

SOUTH MIAMI, FLORIDA 33143

(City, State and Zip Code)

LAW@GBTAXLAW.COM

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

JOHN S. BOHATCH, ESQ.

at ( 305 ) 666-1040

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$150.00 Filing Fees  
(\$25 for Conversion  
& \$125 for Articles  
of Organization)

☐ \$155.00 Filing Fees  
and Certificate of  
Status

☐ \$180.00 Filing Fees  
and Certified Copy

☐ \$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

FILED

**Certificate of Conversion**

For

**"Other Business Entity"**

Into

**Florida Limited Liability Company**

10 JUN 25 AM 11:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This Certificate of Conversion **and attached Articles of Organization** 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:  
CARIB SALES, INC. 512468

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a CORPORATION.  
(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 09/16/1976.  
(Enter date "Other Business Entity" was first organized, formed or incorporated)

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:

4. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

CARIB SALES, 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 this 14<sup>th</sup> day of JUNE 20<sup>10</sup>.


**Signature of Member or Authorized Representative of Limited Liability Company:**

Signature of Member or Authorized Representative: 

Printed Name: MOISES KRIGER

Title: MANAGER

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]**

Signature: 

Printed Name: MOISES KRIGER

Title: PRESIDENT

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

**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:	\$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

### ARTICLE I - Name:

The name of the Limited Liability Company is:

CARIB SALES, 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:

4500 NW 135TH STREET  
OPA LOCKA, FLORIDA 33054

#### Mailing Address:

4500 NW 135TH STREET  
OPA LOCKA, FLORIDA 33054

### 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:

G.B. & B-B REGISTRIES, LLC

Name

7301 SW 57TH COURT, SUITE 560

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

SOUTH MIAMI

FL 33143

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:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

MOISES KRIGER

4500 NW 135TH STREET

OPA LOCKA, FLORIDA 33054

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_.

(OPTIONAL)

(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 Certificate of Conversion, if an effective date is listed therein.)

**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.)

MOISES KRIGER

Typed or printed name of signee

FILED  
10 JUN 25 AM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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)**