# L100000760275

| (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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07/19/10--01038--016 \*\*150.00



D. BRUCE
JUL 20 2010
EXAMINER

# **COVER LETTER**

| TO:                                     | Registration S<br>Division of C  |  |                          |                        |   |         |          |
|---|--|--|--------------------------|------------------------|---|---------|----------|
| SUBJ                                    | ECT: UPF EXE   |  |                          |                        |   |         | _        |
|   |  | (Name of Resulting   | Florida Lim              | ited Company           | /)  |         |          |
| conve                                   |  | cate of Conversion, Ar siness Entity" into a "08.439, F.S. |                          | _                      | •   |         | to       |
| Please                                  | e return all corre   | espondence concerning                                      | g this matte             | er to:                 |   |         |          |
| LUIS I                                  | R SMITH  |  |                          |                        |   |         |          |
|   |  | (Contact Person)   |                          |                        |   | Sign    |          |
| JESSE                                   | L INVESTMENT   | S LLC  |                          |                        |   |         | <u>ر</u> |
|   |  | (Firm/Company)   |                          |                        |   | # T     | <b>=</b> |
| 11402                                   | NW 41ST STREE  | T STE 211  |                          |                        |   | SSE     |          |
| <del></del>                             |  | (Address)  |                          |                        |   | (T)     | PH       |
| DORA                                    | L, FL. 33178   |  |                          |                        |   |         | င္မာ     |
|   | ((   | City, State and Zip Code)                                  |                          |                        |   | 86      | 9        |
| LM.JE                                   | SSEL@GMAIL.C   | ОМ   |                          |                        |   | 14.4    |          |
| E-n                                     | nail Address: (to b  | e used for future annual re                                | port notificat           | ions)                  |   |         |          |
| For fu                                  | rther information  | on concerning this mat                                     | tter, please             | call:                  |   |         |          |
| LUIS F                                  | R SMITH  |  | at (305                  | ) 470-                 | 2429 / (305) 477-66   | 538     |          |
|   | (Name of Conta   | ct Person)   | (Are                     | a Code and D           | aytime Telephone l  | Number) | _        |
| Enclos                                  | sed is a check for   | or the following amou                                      | nt:                      |                        |   |         |          |
| (\$25 for & \$125                       | 0.00 Filing Fees<br>r Conversion<br>for Articles<br>unization)                                       | □\$155.00 Filing Fees<br>and Certificate of<br>Status      | □\$180.00<br>and Certifi | Filing Fees<br>ed Copy | □\$185.00 Filing<br>Certified Copy, a<br>Certificate of Sta | and     |          |
| Regist<br>Division<br>Clifton<br>2661 I | ET ADDRESS<br>tration Section<br>on of Corporati<br>n Building<br>Executive Center<br>assee, FL 3230 | ons<br>er Circle   | R<br>D<br>P              | egistration            | Corporations<br>27  |         |          |

## **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.

| Certificate of Conversion is: UPF EXPORT, INC   | .•       |          |
|---|----------|----------|
| (Enter Name of Other Business Entity)   | _        |          |
| 2. The "Other Business Entity" is a FLORIDA PROFIT CORPORATION PUBLICATION                                  | 437      | 72       |
| (Enter entity type. Example: corporation, limited partnership,  | , ,      | <u> </u> |
| general partnership, common law or business trust, etc.)  |          |          |
| first organized, formed or incorporated under the laws of STATE OF FLORIDA                                  |          |          |
| (Enter state, or if a non-U.S. entity, the name of the country)   |          |          |
| on 07/30/2009   | <b>5</b> |          |
| (Enter date "Other Business Entity" was first organized, formed or incorporated                             | ″ 등      | ft:      |
| (Enter date "Other Business Entity" was first organized, formed or incorporated                             | <u> </u> | **       |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or count                       | 9        | ľ        |
| under the laws of which it is now organized, formed or incorporated:  | PH       |          |
| STATE OF FLORIDA  | က်.      |          |
| STATE OF FLORIDA  | 4        |          |
| 4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |          |          |
| UPF EXPORT 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                        | i .      |          |

| Signed             | I this 15   | _day of   | 20 <u></u>    | <u>.</u>      |                |   |                |                  |
|--------------------|---|---|---------------|---------------|----------------|---|----------------|------------------|
| Signat             | ture of Membe   | er or Authorized Representa                       | tive of       | Limited Lia   | bility Com     | pany:   |                |                  |
| Signat<br>Printed  | ure of Member<br>I Name: <u>ANTON</u>                                     | or Authorized Representative                      | :<br>_ Title: | DIRECTOR/     | Pardo E        | · .   |                |                  |
| <u>Signat</u>      | ure(s) on behal   | f of Other Business Entity: [                     | See bele      | ow for requir | ed signatu     | re(s).]   |                |                  |
| Signati            | ure:  | nfalandati<br>IETALANDAETA                        | Title         | DIRECTOR      | <del></del>    |   |                |                  |
|                    | are:  | i)  | 11116.        | DIRECTOR      |                |   |                |                  |
| Printed            | Name ALFRED   | O FRANQUIS  | _ Title:      | PRESIDENT     | ***            |   |                |                  |
| Signati            | ire: Elm  |   | Ti'd          | VICE PRESID   | NENT           |   |                |                  |
|                    | /   | <del>o vo</del> úeto                              |               |               |                |   |                |                  |
| Signati            | ıre:  |   | Tiste         | · ·           |                |   |                |                  |
| Printed            | Name:   |   | _ Hue:        |               |                |   |                |                  |
| Signatu            | ıre:  |   | Title         |               |                |   |                |                  |
| rimed              | i Name:   |   | _ me:         |               | <del>, ,</del> |   |                |                  |
| Signati            | ıre:  |   |               |               |                |   |                |                  |
| Printed            | Name:   |   | _ Title:      |               |                |   |                |                  |
| <u>If Flor</u>     | ida Corporatio  | <u>n:</u>   |               |               |                | ESS<br>SS<br>SS<br>SS<br>SS<br>SS<br>SS<br>SS<br>SS<br>SS<br>SS<br>SS<br>SS | <del>3</del> . |                  |
| _                  |   | , Vice Chairman, Director, or C                   |               |               |                | Žä.   |                |                  |
| If Dire            | ctors or Officers   | s have not been selected, an Inc                  | orporato      | or must sign. |                | IAR   | L 19           |                  |
| If Flor            | ida General Pa  | rtnership or Limited Liabilit                     | y Partn       | ership:       |                | hand and  | 4              |                  |
| Signatu            | ire of one Genei  | ral Partner.                                      |               |               |                |   | ⊋ !<br>∵ (     | ו ו<br>כ         |
|                    | <b>ida Limited Pa</b><br>ares of <u>ALL</u> Ge                            | rtnership or Limited Liability<br>neral Partners. | y Limite      | ed Partnersh  | <u>ip:</u>     | ORIGA<br>ORIGA  | <u>.</u>       | ر <sub>ند.</sub> |
| All oth<br>Signatu | ers:<br>ire of an authori   | zed person.                                       |               |               |                |   |                |                  |
| Fees:              |   |   |               |               |                |   |                |                  |
|                    | Certificate of C<br>Fees for Florid<br>Certified Copy<br>Certificate of S | la Articles of Organization:                      |               |               |                |   |                |                  |

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

| UPF EXPORT LLC  |  | •  | _            |
|---|--|--|--------------|
| (Must end with the word "LLC.")   | ds "Limited Liability Comp                               | pany," the abbreviation "L.L.C.," or the designation |              |
| ARTICLE II - A  |  |  |              |
| The mailing addre   |  | s of the principal office of the Limited             |              |
| Principal Office  | Address:   | Mailing Address:                                     |              |
| 6436 SW 130 PL #80  | 4  | 6436 SW 130 PL #804                                  | _            |
| MIAMI, FL. 33183  |  | MIAMI, FL. 33183                                     | -            |
| Signature:<br>(The Limited Liability Cindividual or another business entity with an | Company cannot serve as its active Florida registration. |  | 10 JUL 19 PM |
|   | 6436 SW 130 PL #804                                      | Name   | <i>₽</i> ₹   |
|   |  | ·  | <b>-</b>     |
|   | MIAMI  | FL 33183   |              |

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

City, State, and Zip

(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>  | Name and Address:  |
|--|--|
| "MGR" = Manager  |  |
| "MGRM" = Managing Member   | er   |
| MGR  | ANTONIETA LANDAETA   |
|  | 6436 SW 130 PL #804  |
|  | MIAMI, FL. 33183   |
| MGR  | ALFREDO FRANQUIS   |
|  | 6436 SW 130 PL #804  |
|  | MIAMI, FL. 33183   |
| MGR  | EDUARDO UGUETO   |
|  | 6436 SW 130 PL #804  |
|  | MIAMI, FL. 33183   |
|  | WITH 111, 1 12, 33 103   |
|  |  |
|  |  |
|  |  |
|  | (Heapttackment if necessary)   |
|  | (Use attachment if necessary)  |
| <b>LE V:</b> Effective date, if other t  | ·  |
| LE V: Effective date, if other t   |  |
|  | than the date of filing: (OPTIONAL)  |
| fective date: 1) cannot be pri   | than the date of filing:  (OPTIONAL)  ior to nor more than 90 days after the date this   |
| ective date: 1) cannot be print is filed by the Florida Depctive date listed in the attac  | than the date of filing: (OPTIONAL)  ior to nor more than 90 days after the date this partment of State; <u>AND</u> 2) must be the same as   |
| fective date: 1) cannot be prient is filed by the Florida Dep  | than the date of filing: (OPTIONAL)  ior to nor more than 90 days after the date this partment of State; <u>AND</u> 2) must be the same as   |
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| Tective date: 1) cannot be print is filed by the Florida Depotive date listed in the attacking therein.)  REQUIRED SIGNATURE:  | than the date of filing: (OPTIONAL)  ior to nor more than 90 days after the date this partment of State; <u>AND</u> 2) must be the same as   |
| rective date: 1) cannot be print is filed by the Florida Depositive date listed in the attackisted therein.)  REQUIRED SIGNATURE:  Signature of a member of                          | chan the date of filing:  (OPTIONAL)  ior to nor more than 90 days after the date this partment of State; AND 2) must be the same as ched Certificate of Conversion, if an effective an authorized representative of a member.  on 608,408(3), Florida Statutes, the execution   |
| rective date: 1) cannot be print is filed by the Florida Depositive date listed in the attackisted therein.)  REQUIRED SIGNATURE:  Signature of a member of this document constitute | chan the date of filing:  (OPTIONAL)  ior to nor more than 90 days after the date this partment of State; AND 2) must be the same as ched Certificate of Conversion, if an effective an authorized representative of a member.  on 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of penjury  |
| rective date: 1) cannot be print is filed by the Florida Depositive date listed in the attackisted therein.)  REQUIRED SIGNATURE:  Signature of a member of this document constitute | chan the date of filing:  (OPTIONAL)  ior to nor more than 90 days after the date this partment of State; AND 2) must be the same as ched Certificate of Conversion, if an effective an authorized representative of a member.   |
| rective date: 1) cannot be print is filed by the Florida Depositive date listed in the attacking therein.)  REQUIRED SIGNATURE:  Signature of a member of this document constitute   | chan the date of filing:  (OPTIONAL)  ior to nor more than 90 days after the date this partment of State; AND 2) must be the same as ched Certificate of Conversion, if an effective an authorized representative of a member.  on 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perijury |

#### 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)