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(Address) (Address) (City/State/Zip/Phone #) PiCK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
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SECRETARY OF STATE
TALLAHASSEE, FLORID

T. CLINE

JUL 28 2010

EXAMINER

Lisa Cabrera 757.446. 8544- direct 757.446.8670 - fax lcabrera@vanblk.com

101 W. Main Street • 500 World Trade Center • Norfolk, Virginia 23510 • Office 757.446,8600 • Fax 757.446,8670

July 21, 2010

Florida Dept. of State Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re:

Gardner Consulting, LLC

Our File No.: 34561-0032

Dear Sir or Madam:

Enclosed are the following documents for filing on behalf of our client, Gardner Consulting, ŁLC, Virginia limited liability company. The company will take the name of Gardner Management Consulting, LLC in Florida.

- 1. Department of State filing cover letter;
- 2. Certificate of Conversion for Other Business Entity into Florida Limited Liability Company;
- 3. Articles of Organization; and
- 4. Our firm's check in the amount of \$150.00 for the filing fee.

Please return acknowledgment of the filing to my attention at the address above. Thank you for your assistance.

Very truly yours,

VAŅDEVENŢĒR BLACK LLP

Lisa'Cabrera

Corporate Paralegal

Enclosures

4832-7510-5798, v. 1

COVER LETTER

_	istration S sion of C	Section orporations			
SUBJECT:	GARDN	ER MANAGEMENT CO	NSULTING, LLC		
		(Name of Resulting	Florida Limited C	Company))
	Other Bu	isiness Entity" into a '			and fees are submitted to ity Company" in
Please retur	n all corr	espondence concernin	g this matter to	:	
Lisa Cabrera,	Corporate	Paralegal			
		(Contact Person)		_	三章 F
Vandeventer l	Black LLP				1887 1887
		(Firm/Company)			
101 W. Main	St., 500 W	orld Trade Center			Hu. Ott
		(Address)		_	<u> </u>
Norfolk	VA	23510			7,0
	((City, State and Zip Code)			
E-mail Ad	dress: (to b	e used for future annual re	port notifications)		
For further i	nformati	on concerning this ma	tter, please call	:	
LISA CABRE	ERA		at (757) 446-8	544
(Nan	ne of Conta	ct Person)		le and Da	ytime Telephone Number)
Enclosed is	a check f	or the following amou	int:		
\$150.00 Fi (\$25 for Conv. & \$125 for Ar of Organizatio	ersion ticles	\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filin and Certified Co		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET A Registration Division of Clifton Buil 2661 Execut Tallahassee,	Section Corporateding tive Center	ons er Circle	Regis Divisi P. O. 1	tration S on of C Box 632	orporations

Certificate of Conversion For "Other Business Entity" Into Florida Limited Liability Company

convert the following "Other Business Entity" into a Florida Limited Liabilit	
Company in accordance with s.608.439, Florida Statutes.	3
1. The name of the "Other Business Entity" immediately prior to the filing of this	SCORE SCORE
Certificate of Conversion is: GARDNER CONSULTING, LLC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY	T 61.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	22 22 3
first organized, formed or incorporated under the laws of VIRGINIA	
(Enter state, or if a non-U.S. entity, the name of the country)	
on 09-12-2001	
(Enter date "Other Business Entity" was first organized, formed or incorp	orsted)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or countries the laws of which it is now organized, formed or incorporated:	
l. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	d
GARDNER MANAGEMENT CONSULTING, LLC	_
(Enter Name of Florida Limited Liability Company)	·
. 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	e this
locument is flied by the Florida Department of State; AND 2) must be the sar ffective date listed in the attached Articles of Organization, if an effective date standard therein	ne as the

Signed this / / day of MULY	2010	
Signature of Member or Authorized Represen	tative of Limited Liability Compan	<u>y:</u>
Signature of Member or Authorized Representation Printed Name: RANDY SHAPIRO	ve:	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)	J
Signature: Lauley Hape	Ś	
Printed Name: RANDY SHAPIRO	Title: MANAGING MEMBER	_
Signature:		
Printed Name:	Title: 50	3
	F C	(27)
Signature:	<u> </u>	<u></u>
Printed Name:	Title:	رج
Signature:	SE C	
Printed Name:	Tiels.	
		72.15
Signature:	OTAL REAL	
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	corporator must sign.	
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:	
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
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

	GARDNER MANAGEMEN	T CONSULTING, LLC
		y," the abbreviation "L.L.C.," or the designation
ARTICLE II -	Address:	
The mailing add	lress and street address o	f the principal office of the Limited 🥽
Liability Compa		三型 基
· -		Mailing Address
Principal Office	e Address:	Mailing Address:
17380 DUNEDEN	COURT	17380 DUNEDEN COURT
BOCA RATON, FI		BOCA RATON, FL 334961
A Threst ATT TO THE	70	5- 2
	Registered Agent, Regi	istered Office, & Registered Ağent's
Signature:	_	
The Limited Liability adividual or another	Company cannot serve as its ow	vn Registered Agent. You must designate an
	an active Florida registration.)	
•		
The name and th	e Florida street address o	of the registered agent are:
The name and th		-
The name and th	e Florida street address o S.&.S. Management Enter	prises, Inc.
The name and th	S.&.S. Mana genent Enter	prises, Inc.
The name and th	S. & S. Mena generat. Fater	prises. Inc. Name
The name and th	S & S Mana generat Enter 17380 DUNEDEN COUR Florida street address	prises, Inc.
The name and th	S. & S. Mena generat. Fater	prises. Inc. Name
The name and th	S. & S. Mana generat Fater 17380 DUNEDEN COUR Florida street address BOCA RATON	Name RT (P.O. Box <u>NOT</u> acceptable)
	S & S Mena general Enter 17380 DUNEDEN COUR Florida street address BOCA RATON City	Name (P.O. Box <u>NOT</u> acceptable) FL 33496 7, State, and Zip
Having been n	S.& S. Mana generat. Finter 17380 DUNEDEN COUR Florida street address BOCA RATON City camed as registered agent	Name RT (P.O. Box NOT acceptable) FL 33496 7, State, and Zip and to accept service of process for the
Having been na above stated lin	S & S Management Enter 17380 DUNEDEN COUR Florida street address BOCA RATON City amed as registered agent atted liability company at	Name RT R(P.O. Box NOT acceptable) FL 33496 V, State, and Zip and to accept service of process for the the place designated in this certificate, I
Having been na above stated lin hereby accep	S & S Mena generit Enter 17380 DUNEDEN COUR Florida street address BOCA RATON City camed as registered agent nited liability company at pt the appointment as reg	Name (P.O. Box NOT acceptable) FL 33496 V, State, and Zip and to accept service of process for the the place designated in this certificate, I istered agent and agree to act in this
Having been na above stated lim hereby accep capacity. I furt	S & S Mena generit Enter 17380 DUNEDEN COUR Florida street address BOCA RATON City camed as registered agent nited liability company at pt the appointment as register agree to comply with	Name (P.O. Box NOT acceptable) FL 33496 Notate, and Zip and to accept service of process for the the place designated in this certificate, I istered agent and agree to act in this the provisions of all statutes relating to
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Having been no above stated lin hereby accep capacity. I furt the proper and	S & S Mena generit Enter 17380 DUNEDEN COUR Florida street address BOCA RATON City amed as registered agent inted liability company at the appointment as register agree to comply with a complete performance of	Name (P.O. Box NOT acceptable) FL 33496 Notate, and Zip and to accept service of process for the the place designated in this certificate, I istered agent and agree to act in this the provisions of all statutes relating to
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Having been no above stated lin hereby accep capacity. I furt the proper and	S & S Mena generit Enter 17380 DUNEDEN COUR Florida street address BOCA RATON City amed as registered agent atted liability company at the appointment as register agree to comply with a complete performance of the complete	Name (P.O. Box NOT acceptable) FL 33496 7, State, and Zip and to accept service of process for the the place designated in this certificate, I istered agent and agree to act in this the provisions of all statutes relating to fmy duties, and I am familiar with and as registered agent as provided for in
Having been no above stated lin hereby accep capacity. I furt the proper and	S & S Management Enter 17380 DUNEDEN COUR Florida street address BOCA RATON City camed as registered agent inited liability company at pt the appointment as register agree to comply with complete performance of chapter 6 Registered Agen	Name (P.O. Box NOT acceptable) FL 33496 Notate, and Zip and to accept service of process for the the place designated in this certificate, I istered agent and agree to act in this the provisions of all statutes relating to fmy duties, and I am familiar with and as registered agent as provided for in 108, F.S. The Signature (REQUIRED) sident of S & S Management Enterprises, Inc.

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	RANDY SHAPIRO
	17380 DUNEDEN COURT
	BOCA RATON, FL 33496
	ASE CE
	52 2
	光光
	10 H
	(OPTIONAL)
fective date: 1) cannot be prior to near is filed by the Florida Department of the date listed in the attached Constending therein.)	date of filing:
fective date: 1) cannot be prior to not is filed by the Florida Department of the date listed in the attached Constant is the distention of the second secon	date of filing: (OPTIONAL) or more than 90 days after the date this nt of State; AND 2) must be the same as
ective date: 1) cannot be prior to not is filed by the Florida Department of the attached Constant the attache	date of filing: (OPTIONAL) or more than 90 days after the date this nt of State; AND 2) must be the same as ertificate of Conversion, if an effective
Sective date: 1) cannot be prior to not is filed by the Florida Department ctive date listed in the attached Constead therein.) REQUIRED SIGNATURE: Signature of a member or an autofiliation (In accordance with section 608.4 of this document constitutes an affile.	OPTIONAL) or more than 90 days after the date this nt of State; AND 2) must be the same as ertificate of Conversion, if an effective horized representative of a member. O8(3), Florida Statutes, the execution irmation under the penalties of perjury ted herein are true.)
ent is filed by the Florida Department of the date listed in the attached Constant is desired therein.) REQUIRED SIGNATURE: Signature of a member or an autoful of this document constitutes an affithat the facts standard RANDY SHAPIRO, MANAGEMENT AND	(OPTIONAL) or more than 90 days after the date this not of State; AND 2) must be the same as certificate of Conversion, if an effective horized representative of a member. (08(3), Florida Statutes, the execution irmation under the penalties of perjury ted herein are true.)

\$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