# 110000089353

(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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D. BRUCE
AUG 25 2010
EXAMINER

# **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: SISTROL GROUP LLC		
	Florida Limited Company)	
The enclosed Certificate of Conversion, Arconvert an "Other Business Entity" into a "accordance with s. 608.439, F.S.		
Please return all correspondence concerning	g this matter to:	
LUIS R SMITH		
(Contact Person)		
JESSEL INVESTMENTS LLC		
(Firm/Company)		
11402 NW 41ST STREET STE 211		
(Address)		
DORAL, FL. 33178		70 THE CO.
(City, State and Zip Code)		
LM.JESSEL@GMAIL.COM		ZY ASS
E-mail Address: (to be used for future annual rep	port notifications)	m K
For further information concerning this mat	tter, please call:	O AUG 23 AH ID: 28 LUAHASSEE. FLORID
LUIS R SMITH	at (305) 470-2	429 / (305) 477-663
(Name of Contact Person)		ytime Telephone Number)
Enclosed is a check for the following amou	nt:	
■ \$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:	MAILING A	ADDRESS:
Registration Section	Registration S	
Division of Corporations	Division of C	
Clifton Building 2661 Executive Center Circle	P. O. Box 632	
Tallahassee, FL 32301	Tallahassee, I	TL 32314

# 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:
SISTROL GROUP LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a PROFIT CORPORATION \$\int 0.5 - \langle 0.5 78.
(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 STATE  (Enter state, or if a non-U.S. entity, the name of the country)
on <u>08/30/2005</u>
(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:
FLORIDA STATE
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SISTROL GROUP 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 13 day of AUGUST	_20_10
Signature of Member or Authorized Representati	11.6
Signature of Member or Authorized Representative Printed Name: SANTIAGO GONZALEZ	Title: PRESIDENT
Signature(s) on behalf of Other Business Entity:  S	See below for required signature(s).]
Signature:	
Printed Name: SANTIAGO GONZALEZ	Title: PRESIDENT
Signature:	
Signature:Printed Name:	_Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	_ Title:
Signature:	
Printed Name:	_ Title:
If Florida Corporation:	<del>G</del>
Signature of Chairman, Vice Chairman, Director, or C	
If Directors or Officers have not been selected, an Inco	orporator must sign.
If Florida General Partnership or Limited Liability	y Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Certificate of Conversion:	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:

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

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
SISTROL GROUP LLC	
(Must end with the words "Limited Liability Compan" LLC.")	y," the abbreviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of Liability Company is:	of the principal office of the Limited
Principal Office Address:	<b>Mailing Address:</b>
11402 NW 41ST STREET STE 211 DORAL, FL. 33178	11402 NW 41ST STREET #211 DORAL, FL. 33178
20112,12,201,0	DOKAL, FL. 331/6

### 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:

SANTIAGO GONZALEZ

Name 11402 NW 41ST STREET #211 Florida street address (P.O. Box NOT acceptable) **DORAL** 

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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing M	ember
MGR	SANTIAGO GONZALEZ
	11402 NW 41ST STREET #211
	DORAL, FL. 33178
MGR	MARISABEL J. ORTA
	11402 NW 41ST STREET #211
	DORAL, FL. 33178
	(Use attachment if necessary)
LF V• Effective date if of	ther than the date of filing:
LID V. Encenve date, it of	(OPTIONAL)
ffective date: 1) cannot b	e prior to nor more than 90 days after the date this
	Department of State; AND 2) must be the same as
	attached Certificate of Conversion, if an effective
listed therein.)	
•	D.F.
REQUIRED SIGNATUR	BE:
REQUIRED SIGNATU	BE:
REQUIRED SIGNATUR	er or an authorized representative of a member.
REQUIRED SIGNATURE Signature of a member	er or an authorized representative of a member
REQUIRED SIGNATURED Signature of a member (In accordance with s	For Box

**Filing Fees:** 

SANTIAGO GONZALEZ

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

LEZ
Typed or printed name of signee

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)