L10000094872

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
AND ANASSEE, FLORIDA

J. BRYAN
SEP 1 0 2010
EXAMINER

COVER LETTER

TO: Registration Section

Division of Cor	rporations			
SUBJECT:	BDI Services, LL	С		
	(Name of Resulting F	lorida Limited Con	npany)	
The enclosed Certification convert an "Other Business accordance with s. 608	iness Entity" into a "F 3.439, F.S.	Florida Limited 1		
Please return all corres	pondence concerning	this matter to:		
Susan Smith				
Ian S. Giovinc	(Contact Person)			Jus 5
				FE SA T
	(Firm/Company)			
609 W. Azeele St		· · · · · · · · · · · · · · · · · · ·		13.55 is
	(Address)			加多星
	5-2205			10 to
	ty, State and Zip Code)		ν.	
susan@stratton1	used for future annual rep	ort notifications)		·
For further information	•			
Susan Smith		at (813	251-1624	
(Name of Contact	t Person)	(Area Code	and Daytime Telephone 1	Number)
Enclosed is a check fo	r the following amou	nt:		
(\$25 for Conversion	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cop		and
STREET ADDRESS Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons r Circle	Registr Divisio P. O. B	ation Section or of Corporations ox 6327 ssee, FL 32314	

Certificate of Conversion For "Other Rusiness Entity"

"Other Business Entity"

Into

Florida Limited Liability Company

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 Bu	siness Entity" immediate	ly prior to the filing of this
Certificate of Conversion is:	BDI Services, Inc.	#P05000068612
(Ente	er Name of Other Busin	
	" is a <u>corporation</u> e. Example: corporatio ership, common law or	n, limited partnership,
first organized, formed or inco	rporated under the laws o	fFlorida
(Enter state, or	if a non-U.S. entity, the	name of the country)
on 5-10-2 (Enter date "Other Busine		nnized, formed or incorporated)
3. If the jurisdiction of the "Or under the laws of which it is no		
4. The name of the Florida Lin Articles of Organization:	mited Liability Company	as set forth in the attached
BDI Services, LLC		
(Enter Nam	ne of Florida Limited Lia	ability Company)
•	ot be prior to nor more t ida Department of State	han 90 days after the date this e; <u>AND</u> 2) must be the same as the

Signed this 20 day of Queguet	_ 20 <u>_ 10</u>
Signature of Member or Authorized Representa	
Signature of Member or Authorized Representative Printed Name: David C. Fago	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]
Signature: David C Fago	Title:President
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Sindahama	E S T
Signature:Printed Name:	Title:
	Title: SSEE TO A TO STATE TO S
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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

e abbreviation "L.L.C.," or the design	nation
mulualmal office of the Lim	10 6
principal office of the Lini	ilog .
	平元 等
Mailing Address:	B 30
	SEG
same	
	70/
;	

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:

Ian S	. Giovir	ıco, Esq	•		
609 W.	Azeele	Name Street	Ş	Ste.	D
Florida st	reet addre	ss (P.O. E	ox N	OT a	cceptable)
Tampa	_		FL	33	606-2205
-	C	ity, State,	and Z	ip	

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:

	per D. I.I. G. T.
MGRM	David C. Fago
	13006 Royal George Ave.
	Odessa, Florida 33556
·	
	SEC
	S
	F. S.
· · · · · · · · · · · · · · · · · · ·	
	<u></u>
· · · · · · · · · · · · · · · · · · ·	(OPTIONAL) rior to nor more than 90 days after the date this
ctive date: 1) cannot be port is filed by the Florida Detive date listed in the attacted therein.) EQUIRED SIGNATURE:	than the date of filing:
ctive date: 1) cannot be post is filed by the Florida Detive date listed in the attacted therein.) EQUIRED 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 this partment of State; AND 2) must be the same as ched Certificate of Conversion, if an effective
ctive date: 1) cannot be post is filed by the Florida Detive date listed in the attacted therein.) EQUIRED SIGNATURE: Signature of a member of this document constitut that the	than the date of filing:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)
Page 2 of 2