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PICK-UP	☐ WAII	MAIL
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Certified Copies	Certificates	s of Status

Special Instructions to Filing Officer:

L. SELLERS

JAN 31 2011

**EXAMINER** 

Office Use Only



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#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: DAFO Consulting, LLC	
(Name of F	Resulting Florida Limited Company)
"Other Business Entity" into a "Florida Lin	ticles of Organization, and fees are submitted to convert an nited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning	g this matter to:
Karen L Varela, Esq.	
(Contact Person)	<del></del>
Karen L Varela PA	<u> </u>
(Firm/Company)	
6303 Blue Lagoon Drive Ste 400	·
(Address)	
Miami, FL 33126	
(City, State and Zip Code)  david da fo E Yahoo  E-mail address: (to be used for future annual report	notifications)
For further information concerning this ma	tter, please call:
Karen L Varela, Esq.	at ( 305 ) 444-7078
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amou	int:
\$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

## 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 Certific Conversion is:	ate of		
DAFO Consulting Corp  (Enter Name of Other Business Entity)			
(Enter Came of State Pastiness Entry)			
2. The "Other Business Entity" is a for-profit 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 April 23, 2007			
(Enter date "Other Business Entity" was first organized, formed or incorpo	rated)		
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country undo which it is now organized, formed or incorporated:	er the la	 	CORP.
4. The name of the Florida Limited Liability Company as set forth in the attached Article Organization:	s of	JAN 28 PH	100 mm
DAFO Consulting, LLC	್ರಿಕಿನ್ ಯಕ್ಕ	<del>င့</del>	
(Enter Name of Florida Limited Liability Company)		ŧ.	
5. If not effective on the date of filing, enter the effective date:	î.Leu		
(The effective date: 1) cannot be prior to nor more than 90 days after the date this do filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective da attached Articles of Organization, if an effective date is listed therein.)			
6. The conversion is permitted by the applicable law(s) governing the other business entity conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting		ersion.	
7. The "Other Business Entity" currently exists on the official records of the jurisdiction uncurrently organized, formed or incorporated.	der whi	ch it is	

Signed this 26 day of January	20
	presentative of Limited Liability Company:
	tated in this document are true. Any false information
constitutes a third degree felony as provid	
Signature of Member or Authorized Repre	esentative:
Printed Name: David Fournier	Title Managing Member
	Entity: Individual(s) signing affirm(s) that the facts st
s.817.155, F.S. [See below for required sig	ation constitutes a third degree felony as provided for
1/ / \ 1	
Signature: Printed Name: David Fournie	
Printed Name: David Fournie	Title: Director
Signature:	Title:
i i inted i vaine.	i me.
Signature:	
Printed Name:	Title:
Signature:	Title:
Timiled Ivalile.	THIC.
Signature:	
Printed Name:	Title:
Clamphoro	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Dire If Directors or Officers have not been selecte	
if Directors or Officers have not been selecte	d, an incorporator must sign.
If Florida General Partnership or Limited	Liability Partnership:
Signature of one General Partner.	
TARREST TO A TO THE STATE OF TH	X C. I. W. C. I. Co. A. Donato condition
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liabinty Limited Partnersmp:
Signature of the second in the second	
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)
Carrier to a Court and '	\$5.00 (Optional)
Certificate of Status:	\$3.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
DAFO Consulting, LLC (Must end with the words "Limited Liability Company, the abbrevia	ation "L.L.C.," or the designation "LLC.")	
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
10720 NW 66th St, Ste. 203 Doral, FL 33178	10720 NW 66th St, Ste. 203 Doral, FL 33178	
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	ffice, & Registered Agent's Signature: Agent. You must designate an individual or another	
The name and the Florida street address of the regis	stered agent are:	
David Fournier		
	ame	
10720 NW 66th St, Ste	e 203	
Florida street address (P.		
·		
City, Sta	FL 33178 te, and Zip	
company at the place designated in this certificate, I agree to act in this capacity. I further agree to comp proper and complete performance of my duties, and position as registered agent as provided for in Chapt Registered Agent	aphfamiliar with and accept the obligations of my	

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 M	1ember
MGRM	David Fournier
	10720 NW 66th St, Ste. 203
• • • • • • • • • • • • • • • • • • •	Doral, FL 33178
·	
	·
(Use attachment if necess	sary)
TICLE V: Effective date, if	f other than the date of filing: (OPTIONAL)
66 41 T. 43	
	be prior to nor more than 90 days after the date this document is filed by
	ate; <u>AND</u> 2) must be the same as the effective date listed in the attached a effective date listed therein.)
unicate of Conversion, if at	reflective date fisted therein.)
QUIRED SIGNATURE:	
<u>Volkado</u> ordaniri orași	M.
<u> </u>	
Signature of a more	the research of the second of a member.
the penalties of perjury that the	8.408(3), Florida Statutes, the execution of this document constitutes an affirmation under e facts stated herein are true. I am aware that any false information submitted in a f State constitutes a third degree felony as provided for in s.817.155, F.S.)
Dovid Format	
<u>David Fournie</u>	Typed or printed name of signee
	Typed of printed name of signed
•	