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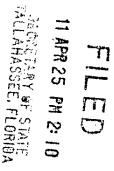
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



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D. BRUCE

APR 26 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PIXEL GRAPHICS INC. (Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
ALEXANDRA CASTANO.
(Contact Person)
(Firm/Company)
1920 NW 82 AVE.
1920 NW 82 AVE. (Address) MIAMI FL 33126. (City, State and Zip Code) Q/exandracristina 2001 @ Yahoo.com
E-mail address: do de used for muire annual report normeauons) /
For further information concerning this matter, please call:
ALEXANDRA CASTANDat (786) 287-1693. 5 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$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 Certified Copy, and Certificate of Status
STREET ADDRESS: MAILING ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 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 Certificate of
Conversion is: PIXEL GRAPHICS INC.
(Enter Name of Other Business Entity)
Conversion is: PIXEC GRAPHICS INC. (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a CORPORATION POPULATION.
(Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
on ///03/2009 (Enter date "Other Business Entity" was first organized, formed or incorporated)
(Enter date "Other Rusiness Entity" was first organized, formed or incornorated)
(Direct date Other Daviness Directy Was instruiganized) for med of invest porarea)
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:
N/A.
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Organization:
PIXELGRAPHICS LLC.
(Enter Name of Florida Limited Liability Company)
(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.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the
conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this day of	2H 20 //·	
Signature of Member or Authorized Rep Individual signing affirms that the facts sta constitutes a third degree felony as provide	ted in this document are true. An	
Signature of Member or Authorized Repres Printed Name: HOEL DEFREITE	entative: x. Title: HGM.	
Signature(s) on behalf of Other Business E this document are true. Any false informat s.817.155, F.S. [See below) for required sign Signature:	ion constitutes a third degree felor ature(s).]	y as provided for in
Signature: Printed Name: When Months Printed Name: Printed Name: Anid Define	EITAS Title: 1961.	1 PD. 1 VP.
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	·
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected		TAPA
If Florida General Partnership or Limited Signature of one General Partner.	<u>Liability Partnership:</u>	25 PM SSEE, FI
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	Liability Limited Partnership:	PM 2: 10
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) Page 2 of 2	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
PIXEL GNAPHICS LLC. (Must end with the words "Limited Liability Company, the abbreviation "L.L.C.," or the designation "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
7255 NW 68 ST. 7255 NW 68 ST. 5TE. 5 MANY, FR 33166 MIANU, FR 33166.	
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: $ \frac{Abe C}{Name} = \frac$	77
8240 SW 65 AVE F-4. FR IT	7
Florida street address (P.O. Box NOT acceptable))
City, State, and Zip	
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)	
registered Ageilt a aignature (INTO INTED)	

(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:

Title:	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing N	Member	
MGR	Ahel DEFRETTAS	
	ABEL DEFREMAS POJO SW 65 AVE F-4	
	MIAMI FL 33143	
MGR.		
1/9/6.	19ANIO DE PAETINS	
	8240 SH 65 AVE F-4 MIAMI FL 33143	
	111191111 12 33:13	
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lorida Department of S	t be prior to nor more than 90 days after the date this document is tate; AND 2) must be the same as the effective date listed in the arm effective date listed therein.)	
(In accordance with section 6 the penalties of perjury that t	ember or an authorized representative of a member. 508.408(3), Florida Statutes, the execution of this document constitutes an affirmation the facts stated herein are true. I am aware that any false information submitted in a	1
(In accordance with section 6 the penalties of perjury that t document to the Department	i08.408(3), Florida Statutes, the execution of this document constitutes an affirmati the facts stated herein are true. I am aware that any false information submitted in a	11 4
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(In accordance with section 6 the penalties of perjury that t document to the Department	108.408(3), Florida Statutes, the execution of this document constitutes an affirmation the facts stated herein are true. I am aware that any false information submitted in a of State constitutes a third degree felony as provided for in s.817.155, F.S. Tryped or printed name of signee	II APROP
(In accordance with section 6 the penalties of perjury that t document to the Department	108.408(3), Florida Statutes, the execution of this document constitutes an affirmation the facts stated herein are true. I am aware that any false information submitted in a of State constitutes a third degree felony as provided for in s.817.155, F.S. Tryped or printed name of signee	II APR OF
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