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(Re	questor's Name)	··-
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only

G. MCLEOD

MAY 2 0 2011

EXAMINER



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SECRETARY OF STATE
TAN I A HASSEF. FI ORITA

131-26265

COVER LETTER

Division of Corporations	
SUBJECT: Pure Enterpris	Resulting Florida Limited Company)
	Articles of Organization, and fees are submitted to convert an imited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerni	ng this matter to:
Albert Bartok	
(Contact Person)	
Pure Enterprises LLC	
(Firm/Company)	_
Albert Bartok (Contact Person) Pure Enterprises LLC (Firm/Company) 9393 Midnight Pass rd. 3 (Address)	# <u>PH3</u>
Scrasota, FL 34242 (City, State and Zip Code)	
E-mail address: (to be used for future annual report	t notifications)
For further information concerning this m	atter, please call:
(Name of Contact Person)	at (33D) 559-8595
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amo	unt:
\$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 ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314
200. Envenire Comer Cher	i ununuooo, i a babit

Tallahassee, FL 32301

Certificate of Conversion

For

"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 Business Entity" immediately prior to the filing of this Certificate of
Conversion is: PURE ENTERPRISES LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of OHIO
first organized, formed or incorporated under the laws of OHIO
and the second s
on 01/13/2011 (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: 4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PURE ENTERPRISES LLG PURE ENTERPRISEST 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.)
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 6 TH day of MAY	201
	presentative of Limited Liability Company:
Individual signing affirms that the facts st constitutes a third degree felony as provide	ated in this document are true. Any false information ed for in s.817.155, F.S.
Signature of Member or Authorized Represented Name: Albert Bertok	sentative: 43 the President
Signature(s) on behalf of Other Business E this document are true. Any false informat s.817.155. F.S. ISee below for required sign	Intity: Individual(s) signing affirm(s) that the facts stated in tion constitutes a third degree felony as provided for in tature(s).
Printed Name: Albred' Bectok	Title: President
Signature:Printed Name:	Title: President
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	
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	Liability 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) Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
_	

Must end with the words "Limited Liability Company, the abbreviation "L.C." or the designation "L.C.")

ARTICLE II - Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>Maning Address:</u>
9393 midnight Pass rd. #PH3	9393 midnight Pass rd. #PH3
Sacrasota, FL 34242	Sambola, FL 34242

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:

Albert Bartok

Name

9393 Midnight Pass rd. #P#3

Florida street address (P.O. Box NOT acceptable)

Scresota FL 34242

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing]	Name and Address: Member
MGR	Albert Bartok 9393 midnight Pass rd. #PH3 Sarosota, FL 34242
(Use attachment if neces	ssary)
effective date: 1) cannot lorida Department of S	if other than the date of filing: (OPTIONAL) be prior to nor more than 90 days after the date this document is filed by tate; AND 2) must be the same as the effective date listed in the attached an effective date listed therein.)
ICLE V: Effective date, effective date: 1) cannot lorida Department of S	if other than the date of filing: (OPTIONAL) be prior to nor more than 90 days after the date this document is filed by tate; AND 2) must be the same as the effective date listed in the attached
ICLE V: Effective date, effective date: 1) cannot lorida Department of S ficate of Conversion, if a UIRED SIGNATURE:	if other than the date of filing: (OPTIONAL) be prior to nor more than 90 days after the date this document is filed by tate; AND 2) must be the same as the effective date listed in the attached an effective date listed therein.)
ICLE V: Effective date, effective date: 1) cannot lorida Department of S ficate of Conversion, if a UIRED SIGNATURE: Signature of a me (In accordance with section 6 the penalties of perjury that it	if other than the date of filing: (OPTIONAL) be prior to nor more than 90 days after the date this document is filed by tate; AND 2) must be the same as the effective date listed in the attached