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Office Use Only

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> SECRETARY OF STATE FALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 6, 2011

PATRICIA F ARRIANDIAGA P.O. BOX 65-1707 MIAMI, FL 33265

SUBJECT: ACQUISITION GROUP OF FLORIDA LLC

Ref. Number: W11000025428

We have received your document for ACQUISITION GROUP OF FLORIDA LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 511A00011272



May 26, 2011

PATRICIA F ARRIANDIAGA P.O. BOX 65-1707 MIAMI, FL 33265

SUBJECT: ACQUISITION GROUP OF FLORIDA LLC

Ref. Number: W11000025428

We have received your document for ACQUISITION GROUP OF FLORIDA LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

A business entity may not serve as its own manager or managing member. Please designate an individual or another business entity as your manager(s) or managing member(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 111A00013079

Division of Comparations D.O. DOV 6297 Tollahoggas Florida 2021

COVER LETTER

Division of Corporations		•	
SUBJECT: Acquisition Group of	florida LLC		
	of Resulting Florida Limit	ted Company)	
The enclosed Certificate of Conversion, a "Other Business Entity" into a "Florida I			
Please return all correspondence concern	ning this matter to:		
Patricia F Arriandiaga			
(Contact Person)	•		. ~
		•	SECRE JARY OF STA
(Firm/Company)			ER SE
PO BOX 65-1707 (Address)			ASS.
,			₩ M M M M M M M M M M M M M M M M M M M
Miami,Florida 33265			FLS
(City, State and Zip Code	;)		AT E
AGFLLC@aol.com E-mail address: (to be used for future annual repo	ort notifications)		D
For further information concerning this n	natter, please call:		
Patricia F. Arriandiaga	ai (488-0378	
(Name of Contact Person)	(Area Code an	d Daytime Telephone Number)	
Enclosed is a check for the following ame	ount:		
\$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:	MAILIN	G ADDRESS:	
Registration Section		on Section	
Division of Corporations	Division of P. O. Box	of Corporations	
Clifton Building 2661 Executive Center Circle		ee, FL 32314	
Tallahassee, FL 32301	i ununuoo	,	

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	and in
Conversion is: Florida aquisition Group Inc.	
(Enter Name of Other Business Entity)	TARY
2. The "Other Business Entity" is a Corporation	光 皇
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	STATE FLORID
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 05/30/2007 (Enter date "Other Business Entity" was first organized, formed or incorpo	orated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country und which it is now organized, formed or incorporated:	er the laws of
<u>N/A</u>	
4. The name of the Florida Limited Liability Company as set forth in the attached Articl Organization:	es of
Acquisition Group of Florida LLC	
(Enter Name of Florida Limited Liability Company)	
5. If not effective on the date of filing, enter the effective date: 04/19/2011 (The effective date: 1) cannot be prior to nor more than 90 days after the date this d filed by the Florida Department of State; AND 2) must be the same as the effective datached 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	
7. The "Other Business Entity" currently exists on the official records of the jurisdiction u	nder which it is

currently organized, formed or incorporated.

Signed this 19 day of April		
	Representative of Limited Liability Cots stated in this document are true. Any ovided for in s.817.155, F.S.	
Signature of Member or Authorized R Printed Name: <u>Patricia F. Arriandiaga</u>	epresentative:	Annakaga
this document are true. Any false info s.817.155, F.S. [See below for required	ess Entity: Individual(s) signing affirm(s) rmation constitutes a third degree felony d signature(s).}	
Signature: Printed Name: Afredo Carreral	Title: President	
Signature:		
•	Title: Vice President	
	rll	
Signature: Marya Archbold Printed Name: Marya Archbold	Title: Sec/Treasurer	
•		
Signature:		AR &
Printed Name:	Title:	AS
Signature		ETARY OF
Printed Name:	Title:	
Signature:	Title:	ATE RIDA
Printed Name:	I itle:	<u> </u>
If Florida Corporation: Signature of Chairman, Vice Chairman, If Directors or Officers have not been se	Director, or Officer. lected, an Incorporator must sign.	
If Florida General Partnership or Lin Signature of one General Partner.		
If Florida Limited Partnership or Liming Signatures of <u>ALL</u> General Partners.	nited 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 on: \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2	

COVER LETTER

•	TO:	Registration Section Division of Corporations	
	SUBJE	ECT: Acquisition Group of Florida LLC	······
		Name of Limited Liability Company	
	The end	closed Articles of Organization and fee(s) are submitted for filing.	
	Please	return all correspondence concerning this matter to the following:	
		Carlos R Fernandez	
		Name of Person .	5
		Acquisition Group of Florida LLC	E CR
	•	Firm/Company	HA HA
	_	528 NW 18th Ave.	SSEE O
		Address	F ST
	ı	Miami, Florida 33125)REE
	-	City/State and Zip Code	12
	i	resilient90@aol.com	
		E-mail address: (to be used for future annual report notification)	
	For furt	ther information concerning this matter, please call:	
	Patrio	cia F Arriandiaga at (786) 488-0378	
	Englos	Name of Person Area Code & Daytime Telephone Number	
_		ed is a check for the following amount:	
Ш	\$125.00	Filing Fee \$\bigc\\$130.00 Filing Fee &\bigc\\$155.00 Filing Fee & \bigc\\$160.00 Fil	ing Fee,

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Certificate of Status

Street/Courier Address

Certified Copy

(additional copy is enclosed),

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status &

(additional copy is enclosed)

Certified Copy

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Com	npany is:
Acquisition Group of Flor	ida LLC
(Must end with the words "Lin	nited Liability Company, "L.L.C.," or "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:
528 NW 18th Ave	PO Box 65-1707
Miami,Florida 33125	Miami,Florida 33265
	
	Single Control of the control of th
The name and the Florida street address	s of the registered agent are:
Carlos R. Ferna	
	Name Or
528 NW 18t	h ave
Florida	street address (P.O. Box NOT acceptable)

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.

City, State, and Zip

Registered Agent's Signature (REQUIRED)

Miami

(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 Member	ASE
MGRM	Carlos R Fernandez 528 NW 18th ave. Miami, Florida 33125
	E.F.F.S.
	OFF S
(Use attachment if necessary)	
TICLE V: Effective date, if other than the effective date is listed, the date must lar 90 days after the date of filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	7
Signature of a memb	er or an authorized representative of a member.
constitutes an affirmation under I am aware that any false info	8.408(3), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
Carlos R. Fer	
T	yped or printed name of signee

Filing Fees:

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

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