# LIIUUUV 76693

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

Office Use Only

B. KOHR

JUL - 5 2011

**EXAMINER** 



600209464186

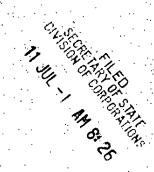
07/01/11--01030--026 \*\*155.00



### COVER LETTER

	on Section of Corporations			•	ン
SUBJECT:	GAN	IGO3 LLC			
BUDGECT.		of Resulting Florida Limi	ted Company)	<del></del>	
	tificate of Conversion, Entity" into a "Florida				
Please return all c	correspondence concern	ning this matter to:	·	• •	
NORMELA BE	HARRY			.`	
	(Contact Person)				· . . :
	(Firm/Company)	······································			
P.O. BOX 6800	58			•	•
	(Address)				
ORLANDO, F	L 32868	•	•		•
	(City, State and Zip Cod	(c)			
E-mail address: (to b	e used for future annual rep	ort notifications)			
For further inforn	nation concerning this	matter, please call:			
NORMELA BEHA	ARRY	at (321)	750-608	()t	
(Name of C	ontact Person)		nd Daytime Telephone N	ım (er)	
Enclosed is a chec	ck for the following am	iount:		3	• .
\$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 Fed Certified Copy, an Certificate of State	nd	
STREET ADDR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	on orations enter Circle	Registrati Division P. O. Box	IG ADDRESS: ion Section of Corporations x 6327 see, FL 32314		

## 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 Certifica Conversion is:	ite of
GANGO2 INC	
(Enter Name of Other Business Entity)	08000076
2. The "Other Business Entity" is a CORPORATION	17000
(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 08/18/2008	rated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under which it is now organized, formed or incorporated:	r the laws of
4. The name of the Florida Limited Liability Company as set forth in the attached Article Organization:	s of
GANGO3 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 do filed by the Florida Department of State; AND 2) must be the same as the effective data 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 to	
7. The "Other Business Entity" currently exists on the official records of the jurisdiction un currently organized, formed or incorporated.	der which it is

Signed this 22 day of JUNE	20_11
Signature of Member or Authorized Re Individual signing affirms that the facts st constitutes a third degree felony as provid	epresentative of Limited Liability Company: stated in this document are true. Any false information ded for in s.817.155, F.S.
Signature of Member or Authorized Repre Printed Name: NORMELA BEHARRY	esentative: Title: PRESIDENT
Signature(s) on behalf of Other Business I this document are true. Any false informa s.817.155, F.S. [See below for required sig	Entity: Individual(s) signing affirm(s) that the facts stated in ation constitutes a third degree felony as provided for in gnature(s).
Signature: Mormela Ret	Title: MGRM
Printed Name: NORMELA BEHARRY	Title: MGRM
Signature:	Title:
Signature:	Title:
Printed Name:	Title:
Signature:	Title:
•	
Signature:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Dire If Directors or Officers have not been selected	ector, or Officer.
If Florida General Partnership or Limited Signature of one General Partner.	d Liability Partnership:
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	d Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy:	\$25.00 \$125.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional) Page 2 of 2

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LI

A	R٦	ľΤ	$\mathbf{CI}$	T.	T	Ng	me:

The name of the Limited Liability Company is:

## **GANGO3 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:	
129 N PINE HILLS ROAD	PO BOX 680058	
ORLANDO, FL 32811	ORLANDO, FL 32868	
·.		•

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:

NORMELA BEHARRY

Name

129 N PINE HILLS ROAD

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

ORLANDO

FL 32811 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

	Nome	and Address:	
<u>Title:</u> "MGR" = Mana		Aug Augu 635.	
"MGRM" = Mar	•		
MGRM	<u></u>	NORMELA BEHARRY	
		18 S OBSERVATORY DRIVE	
		ORLANDO, FL 32835	<del></del>
	<del>-</del>		
			<del></del>
	_		
			<del>.</del>
	<del>_</del>		
(Use attachment	if necessary)		
ARTICLE V: Effective	ve date, if other than the	date of filing:	•
ATTI AA 4 T 4	connot he prior to po	(OPTIONAL) r more than 90 days after the date t	his document is filed by
I he effective date: 1)	cannot be prior to no.	tust he the same as the effective do	ins document is med by
(The effective date: 1) the Florida Departme	ent of State: AND 2) n	tust be the same as the elicenve ha	te listed in the attached
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