

L110000096308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

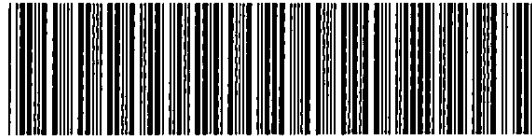
Special Instructions to Filing Officer:

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B. KOHR

AUG 22 2011

EXAMINER



600210523646

08/19/11--01018--003 **180.00

RECEIVED

11 AUG 19 AM 10:48

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 AUG 22 PM 2:44

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 22 PM 2:44

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. MONICA MELGAREJO LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time

2.00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2011

LAZARUS

TALLAHASSEE, FL

SUBJECT: MONICA MELGAREJO LLC
Ref. Number: W11000043367

RECEIVED
11 AUG 22 AM 11:28
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for MONICA MELGAREJO LLC and your check(s) totaling \$180.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate that the name of the corporation that was formed on May 25, 2010, was "MONICA M. MELGAREJO P.A." and not "MONICA MELGAREJO P.A." If you concur, please correct the name listed in Item 1 on the Certificate of Conversion.

ALSO, in Item 4, you must list the name of the resulting LLC -- "MONICA MELGAREJO LLC" -- not the name of the corporation.

Also, please note that in Item 5, you cannot have the effective date of August 17, 2011. Unless you need to have a FUTURE effective date, please make sure Item 5 is left blank.

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) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 811A00019511

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 22 PM 2:44

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. MONICA M. MELGAREJO P.A.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2.00 ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☒ Other - CONVERSION

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company.

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
11 AUG 22 PM 2:44

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:

MONICA M. MELGAREJO P.A.

2. The "Other Business Entity" is a Corporation
first organized, formed or incorporated under the laws of Florida State
on 5/25/2010

(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**:

MONICA M. MELGAREJO 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 not 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 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.

P11000004 4946

Signed this 17 day of August 2011.

Signature of Members or Authorized Representative of Limited Liability Company:

Individual signing affirms that the facts stated in this documents are true. Any false information constitutes a third degree felony as provided for in s.817.155,F.S.

Signature of Member or Authorized Representative: _____

Signature: Monica M. Malgarejo

Printed Name: Monica M. Malgarejo Title: Manager/Member

Signature (s) on behalf of Other Business Entity: Individual (s) signing affirm (s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155,F.S. (See below for required signature (s)).

Signature: Monica M. Malgarejo

Printed Name: Monica M. Malgarejo Title: Manager/Member

Signature: [Signature]

Printed Name: _____ Title: _____

If Florida Corporation :

Signature of Chairman, Vice Chairman , Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signature of ALL General Partners.

All Others:

Signature of an authorized person.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:

MONICA M. MELGAREJO LLC

ARTICLE II- Address:

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

Principal Office Address:

7501 NW 112TH PATH Doral, Fl 33178

Mailing Address:

7501 NW 112TH PATH Doral, Fl 33178

ARTICLE III- Registered Agent, Register Office, & Registered agent's Signature:

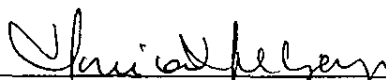
The Name and the Florida street address of the registered agent are:

^E
MONICA M. MELGAREJO
7501 NW 112TH PATH
Florida Street address (PO Box **NOT** acceptable)

Doral, Fl 33178

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 register 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 and accept the obligations of my positions as registered agents as provided for in chapter 608, F.S.


Registered Agent's Signature

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 22 PM 2:44

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 Member

Manager

Title:

Monica M. Melgarejo
7501 NW 112TH PATH
DORAL, FL 33178

Managing Member

Title:

Jose F. Melgarejo
7501 NW 112TH PATH
DORAL, FL 33178

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL) If an effective date is listed, the dated date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

In accordance with section with section 608.408 (3) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Monica Melgarejo

Monica Melgarejo