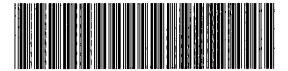
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(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
		:

Office Use Only



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ZOII SEP 22 AN 8: 45
SECRETARY OF STATE

J. SAULSBERRY EXAMINER

SEP 23 2011

COVER LETTER

TO: Registration Section Division of Corporations			
	met Kreations, LLC		
((Name of Resulting Florida Limited Company)		
"Other Business Entity" into a "Flo	ersion, Articles of Organization, and fees are submitted to orida Limited Liability Company" in accordance with s. 6		
Please return all correspondence co	oncerning this matter to:		
Donna Empe (Contact Pers Kizmet Kreation (Firm/Compa	any) ALC AND AND AND AND AND AND AND AN	ZIII SEP 22 SECRETARY	
7011 NW 98th T.	errace	22	1
Tamarac, FL 3 (City, State and Z	3331 Cip Code) Salar S	AM 8: 45 OF STATE	
Donna Emperador	at (954) 562-0687		
(Name of Contact Person)	(Area Code and Daytime Telephone Number)		
Enclosed is a check for the following	ing amount:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)			Α.
STREET ADDRESS:	MAILING ADDRESS:		x"
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P. O. Box 6327		
Tallahassee, FL 32301	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: Kizmet Kreations, Inc.
(Enter Name of Other Business Entity)
(Enter Name of Other Business Entity) 2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florica (Enter state, or if a non-U.S. entity, the name of the country)
on 5-7.08 (Enter date "Other Business Entity" was first organized, formed or incorporated)
(Direct date Other Dusiness Directy was first organized, for med of mediporated)
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 Article of
Organization:
Kizmet Kreations, 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; <u>AND</u> 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 20 day of Sepern	20_11			
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. Any false in document are true. Any false in document are true.	nformati	on	
Signature of Member or Authorized Represe Printed Name: Denna Emperador	entative: Nw M Eu- Title: President			
Signature(s) on behalf of Other Business Enthis document are true. Any false informatis.817.155, F.S. (See below for required sign Signature: Name: Doong Emperador	ntity: Individual(s) signing affirm(s) that to ion constitutes a third degree felony as pro ature(s).]	the facts ovided fo		in
Printed Name: Doona Emperator	Title: Incorporator			
Signature:Printed Name:			•	
Signature: Printed Name: Signature: Printed Name: Signature: Printed Name:	Title:	SECRETA	MIII SEP 22	Ti
Signature:	Tale	YRY SSEE	22	F
Printed Name:	litie:		¥	
Signature:Printed Name:	Title:	TATE	8: 1 :5	O
Signature:Printed Name:	Title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Directly 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 ALL 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

ARTICLE I - Name:

The name of the Limited Liability Company is:	
(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:	
7011 NW 98th Terrace Tamarac, FL 33321 Tamarac, FL 33321 Tamarac, FL 33321	
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:	
Donna Emperador Name	
7011 NW 98th Terrace	
Florida street address (P.O. Box NOT acceptable)	7
Tamarac FL 33331 SER X	r
City, State, and Zip	[7
Having been named as registered agent and to accept service of process for the above stated bridged 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)	y I

Page 1 of 2

(CONTINUED)

Title:	Name and Address:		
"MGR" = Manager "MGRM" = Managing N	1ember		
MGR_	Donna Emperador 7011 NW 98th Tecrace Tamarac, FL 33321		
	· · · · · · · · · · · · · · · · · · ·		
	SECRITALLA	ZIII SEP	
	ASSEE.	P 22	
		₹	
	STATE	8: ₽ 5	,
(Use attachment if neces	sary)		
e effective date: 1) cannot Florida Department of St	if other than the date of filing: (OPTIONAL) be prior to nor more than 90 days after the date this document rate; AND 2) must be the same as the effective date listed in the n effective date listed therein.)		-
DUIRED SIGNATURE:	m M Sh		
Signature of a me	mber or an authorized representative of a member.		
the penalties of perjury that the	08.408(3), Florida Statutes, the execution of this document constitutes an affirm the facts stated herein are true. I am aware that any false information submitted it of State constitutes a third degree felony as provided for in s.817.155, F.S.)		ınder
	Donna M. Empercidor Typed or printed name of signee		

Page 2 of 2