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(Requestor's Name)
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PICK-UP WAIT MAIL
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(Basiless Ellis, Halle)
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HILL B 11 NOV -3 MIII: 59 SECRETARY OF STATE

D. BRUCE

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EXAMINER

COVER LETTER

	Registration Of Division of	n Section f Corporations					
SUBJE	ECT: LILI	LY PRODUCTS IN	NTERNATIONA	L, LLC.			
~~~			f Resulting Florida Lir				
				ation, and fees are subnompany" in accordance			
Please	return all co	orrespondence concern	ing this matter to:				
LEIDII	LYN ZAIT	ER					
		(Contact Person)					
LILLY	PRODUC	TS INTERNATIONA	L, LLC.				
		(Firm/Company)	· · · · -				
4715 E	ELDORAD	O DR					
		(Address)					
TAME	PA, FL 33	8615					
		(City, State and Zip Code	<del>)</del>		$\Xi_{\mathcal{L}}$	=	
LYZAI	TER@AC	DL.COM			LAF LAF	증	
E-mail ad	ddress: (to be	used for future annual repo	ort notifications)		IAS	<b>Y</b>	
For furt	ther inform	ation concerning this n	natter, please call:		RY OF SEE. F	ea <del>A</del>	
LEIDIL	YN ZAITEF	₹	at ( 813	526-3415		<b>X</b> :::	D
· · · · · · · ·	(Name of Co	ntact Person)	(Area Code	and Daytime Telephone Nu	mber	5	
Enclose	ed is a chec	k for the following amo	ount:		24		
^J (\$25 for (	Filing Fees Conversion For Articles ization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Feand Certified Cop	IV 1	d		
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		Registra Division P. O. Bo	NG ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314				

Tallahassee, FL 32301

### **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:
LILLY PRODUCST INTERNATIONAL, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION 1000000000000000000000000000000000000
first organized, formed or incorporated under the laws of FLORIDA, USA
(Enter state, or if a non-U.S. entity, the name of the country)
on 08/12/2010 . Egg ☴ □
(Enter date "Other Business Entity" was first organized, formed or incorporate
>
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:
FLORIDA .
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LILLY PRODUCTS INTERNATIONAL, 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 13 day of OCTOBER	_ 20 <u>11</u> .	
Signature of Member or Authorized Representa	tive of Limited Liability Company:	
Individual signing affirms that the facts stated in t		ation
constitutes a third degree felony as provided for in	s.817.155, F.S.	
Signature of Member or Authorized Representative	Bidie dolar Co	ts.
		20
Printed Name: LIDIA VILLAMAR-CASTRO	_ Inter VP	
Signature(s) on behalf of Other Business Entity: In	ndividual(s) signing affirm(s) that the fa	cts stated in
this document are true. Any false information cons		
s.817.155, F.S. [See below for required signature(s)		
house of the		
Signature: Didin Villama - Castos		
Printed Name: LIDIA VILLAMAR-CASTRO	Title: <u>vp</u>	
Signature: Many Casto		
Printed Name: MARIO CASTRO	Title: TDEACUDE	
Signature: Satto		
Printed Name: LEIOLYN ZAITER	Title: SECRETARY	
_		
Signature: Printed Name:		
Printed Name:	_ Title:	
G' .		
Signature: Printed Name:	Title:	
runted Name.	Title.	
Signature:	•	
Printed Name:		
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Director, or C		
If Directors or Officers have not been selected, an Inc	orporator must sign.	
If Florida General Partnership or Limited Liabilit	y Dortnorshin.	
Signature of one General Partner.	y raithership:	
Signature of one conetar rainter.		
If Florida Limited Partnership or Limited Liability	y Limited Partnership:	
Signatures of ALL General Partners.		
All others:		
Signature of an authorized person.		<b>⊉</b> ∽ _
Eggs		
Fees:		

I NOV -3 AN II: 50 DECRETARY OF STATE LLAHASSEF FINAL

\$30.00 (Optional) \$5.00 (Optional) Page 2 of 2

\$25.00

\$125.00

Certificate of Conversion:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	I	-	Nai	me	e:
	_		_		

The name of the Limited Liability Company is:

# LILLY PRODUCTS INTERNATIONALL, 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:	
6428 N. FLORIDA	4715 ELDORADO DR.	
TAMPA, FL 33604	TAMPA, FL 33615	
		_

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:

LIDIA VILLAMAR-CASTRO	
Name	

4715 ELDORADO DR

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

TAMPA FL 33615
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



- 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
MGRM	LIDIA VILLAMAR-CASTRO
	4715 ELDORADO DR.
	TAMPA, FL 33615
MGR	LEIDILYN ZAITER
	4715 ELDORADO DR
	TAMPA, FL 33615
MGR	LILLY ZAITER
	8012 N. 11TH ST.
	TAMPA, FL 33604
MGR	IVAN ZAITER
	9601 SW 142ND AVE APT. 707
	MIAMI, FL 33186
(Use attachment if nec	e, if other than the date of filing: (OPTIONAL)
ARTICEE V. Encenve date	(OPTIONAL)
(The effective date: 1) cannot the Florida Department of	ot be prior to nor more than 90 days after the date this document is filed by State; <u>AND</u> 2) must be the same as the effective date listed in the attached an effective date listed therein.)
REQUIRED SIGNATURE	: <b>:</b>
<i>#</i> = 1 = 1	
	e Allaman Cantro
Signature of a n	nember or an authorized representative of a member.
the penalties of perjury tha	608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the facts stated herein are true. I am aware that any false information submitted in a nt of State constitutes a third degree felony as provided for in s.817.155, F.S.)
LIDIA VILL	AMAR-CASTRO
	Typed or printed name of signee

Page 2 of 2