# L11000126471

(F	Requestor's Name)	
A)	Address)	
(A)	Address)	
(C	City/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status

Special Instructions to Filing Officer:

L. SELLERS

NOV. = 7 2011

**EXAMINER** 

Office Use Only



000213941680

11/03/11--01026--021 \*\*185.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Sumitra	
	ing Florida Limited Company)
The enclosed Certificate of Conversion, Article "Other Business Entity" into a "Florida Limited	s of Organization, and fees are submitted to convert an Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this	s matter to:
Mercy Marguerit  (Contact Person)  Sumitra LLC  (Firm/Company)	e Rojas
470 Willet Ave (Address)	<del></del>
Maples FL. 3' (City, State and Zip Code)	3014
E-mail address: (to be used for future annual report notifi	cations)
For further information concerning this matter,	please call:
Mery Mourquevite Rojas at (Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$155.00 Filing Fees and Certificate of Status	\$185.00 Filing Fees, Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tellaharana, El., 22314
2661 Executive Center Circle Tallahassee, 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:
Sumited LCC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a  (Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of South Cardina (Enter state, or if a non-U.S. entity, the name of the country)
on 2/23/2010 (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:
Haida PER
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Company as set forth in the attached Arti
(Enter Name of Florida Limited Liability Company)
(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 315t day of October	2011			
Signature of Member or Authorized Representative of Limited Liability Company: Individual signing affirms 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.				
Signature of Member or Authorized Representative: Mery Manuerte Roperite Roperite: Manager				
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: Wary Marqueith Printed Name: Mery Marqueith	Rojas Lojatine: Agent			
Signature:Printed Name:	Title:			
Signature: Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
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: Signatures of ALL General Partners.				
All others: Signature of an authorized person.				
Fecs:				
Fees for Florida Articles of Organization: \$1 Certified Copy: \$3	25.00 125.00 30.00 (Optional) 5.00 (Optional) Page 2 of 2			

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited !	Liability Company is:				
	Sumitra	LLC			
(Must end with the words "Limited	d Liability Company, the abbrev	iation "L.L.C.," or the	designation "LLC.")		
ARTICLE II - Address: The mailing address and s	street address of the princ	cival office of the	Limited Liability	Compan	y is:
Principal Office Address	<u>:</u>	Mailing Addr	ess:		
Napler, FL	Ave 34106	478 NAP	Willet Aug Nes, Fl 34	100	<u> </u>
ARTICLE III - Register (The Limited Liability Company or business entity with an active Flo	annot serve as its own Registere				
The name and the Florida	street address of the reg	istered agent are:			
	Meryl MA	rquevite Ro	<u>jas</u>		
	HOR Will-Florida street address (F		ceptable)		
•	Na plea City, Si	FL ate, and Zip	34108		
Having been named as reg company at the place desig agree to act in this capacity proper and complete perfor position as registered agen	nated in this certificate, y. I further agree to com rmance of my duties, and	I hereby accept the ply with the provis II am familiar with	e appointment as re sions of all statutes	egistered relating	agent and to the
	Merry W Registered Ag	onouroto R entessignature (F	REQUIRED)	SEORET TALLAH <i>I</i>	11 NOV -3
	(C	ONTANUED)		ARY OF	3 7
	Pa	ge Lof 2		FS	NO C

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 "MGRM" = Managing Member	Name and Address:
MGRM	Meryl Marquerite Rojas 4718 Willet Ave Naples, FL 34100
Marin dies Appellier Stage er sandlige des habels einsche seine	
(Use attachment if necessary)	
(The effective date: 1) cannot be prio	than the date of filing:  (OPTIONAL)  or to nor more than 90 days after the date this document is filed by SD 2) must be the same as the effective date listed in the attached rive date listed therein.)
REQUIRED SIGNATURE:	
Signature of a member of	an authorized representative of a member.
the penalties of perjury that the facts s document to the Department of State of	), Florida Statutes, the execution of this document constitutes an affirmation under tated herein are true. Larr aware that any false information submitted in a constitutes a third degree felony as provided for in s.817.155, F.S.)  May a crite Roja Sed or printed name of signee