LIAMOOHAMIZ

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	IL.
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

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MAR 27 2012

EXAMINER

COVER LETTER

Ragistration Section Division of Corporations

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

TO:

SUBJECT: ALL ABOUT 1	HE KIDS BEST INTEREST, LL	\subset	
	of Resulting Florida Limited Company)		
	, Articles of Organization, and fees are submitted to Limited Liability Company" in accordance with s. 6		١.
Please return all correspondence concer	rning this matter to:		
JANETTE S. MENDO	2A		
(Contact Person)			
ALL ABOUT THE KIL	OS BEST INTEREST, LLC		
(Firm/Company)	72,	a ===	
235 NE 23H STREET	DS BEST INTEREST, LLC T, ATHMAIY 1. 33305	Z MAR	- 1
(Address)		MAR 26	;
(Address) WILTON HANORS, FO (City, State and Zip Coo SAMEN 51 @ YAHOO E-mail address: (to be used for future annual rep	1. 33305	26 F	r
(City, State and Zip Coo	de)		,
JAMEN 51@ YAHDO	· Cox	2: 39 2: 39	نہ
E-mail address: (to be used for future annual re	port notifications)	# 39	
For further information concerning this			
JANETTE S. MENDOZ	2A at (954) 234-1966		
(Name of Contact Person)	(Area Code and Daytime Telephone Number)		
Enclosed is a check for the following an	nount:		
\$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 Fees, Certified Copy, and Certificate of Status		
STREET ADDRESS:	MAILING ADDRESS:		
Registration Section Registration Section			

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

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: ALL ABOUT THE KIKS BEST INTERES, INC.
(Enter Name of Other Business Entity) 2. The "Other Business Entity" is a
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 8/3///
on 8/3/// (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 Corganization:
ALL ABOUT THE KILS BEST INTEREST, 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 sould be the such taw(s) and the requirements of 5.000.459, 1.5., 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 23 day of MARC	20/2	
Signature of Member or Authorized Rep Individual signing affirms that the facts st constitutes a third degree felony as provid	ated in this document are true. Any false in ed for in s.817.155, F.S.	nformation
Signature of Member or Authorized Representation Name: ARETTE S. MENT	sentative: prettos. No 2024 Tiple: DIRECTOR	
Signature(s) on behalf of Other Business E this document are true. Any false informat s.817.155, F.S. [See below for required sign	tion constitutes a third degree felony as pro sature(s).]	ovided for in
Signature: JANETIE S. HEN	<i>)</i>	
Printed Name: TANETIE S. MEN	OboZA Title: DIRECTOR	
Signature: Printed Name:		
Printed Name:	Title:	
Signature:Printed Name:	Tale	
Printed Name:	Inte:	
Signature:Printed Name:	Title	
Printed Name:	Title:	
Signature:Printed Name:	Tisle.	
Printed Name:	i ide:	
Signature:Printed Name:		
	1 ne.	
<u>If Florida Corporation:</u> Signature of Chairman, Vice Chairman, Direct	ctor or Officer	7. S
If Directors or Officers have not been selecte		AR 2
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:	2: 39 STATE LERIDA
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	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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Tha	nama	Af t	ha [imita	41

The name of the Limited Liability Company is:

ALL ABOUT THE KIDS BEST INTEREST, 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:
235 NE 23RS STREET	235 NE 23RD STREET
APT # M214	APT # M214
WILTON MANORS, FL. 33705	WILTON MANORS, FC. 33305
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	Agent. You must designate an individual or another
The name and the Florida street address of the regis	stered agent are:
JANETTE S	- MENDOZA SER OF
N:	ame
235 NE 23RA	STREET, ATHH 11214 BAR 23
Florida street address (P.	O. Box NOT acceptable)
WILTON MANORS	
City, Sta	te, 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

The name and address of each N	Manager or Managing Member is as follows:			
<u>Title:</u> "MGR" = Manager	Name and Address:			
"MGRM" = Managing Member				
MGRM	JANETTE S. HENDO. 235 NE 23PD STREET, WILTON MANORS, FL. 2	ZA AM#H214 3305		
				
				
(Use attachment if necessary)				
ARTICLE V: Effective date, if other	than the date of filing: (OPTIONAL)			
he Florida Department of State; Al	or to nor more than 90 days after the date this days after the days aft			
Certificate of Conversion, if an effect	ive date listed therein.)			
REQUIRED SIGNATURE:	1			
Danello	5. Who	AR 26		
Signature of a member or	an authorized representative of a member.	器畫面		
the penalties of perjury that the facts s document to the Department of State of), Florida Statutes, the execution of this document constitut tated herein are true. I am aware that any false information constitutes a third degree felony as provided for in s.817.15	tes amatfirmetton under submitted in a		
	5. MENSOZA			
Typed or printed name of signee				

ARTICLE IV- Manager(s) or Managing Member(s):