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| (Re | questor's Name) | |
|-------------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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VISION OF CORPORATIONS

74049

APR -'5 2012'
T. HAMPTON

COVER-LETTER

| Division of Corporations | | • |
|---|---|---|
| SUBJECT: PLINGO INTERNATIO | NAL, LLC | |
| | Resulting Florida Limit | ed Company) |
| The enclosed Certificate of Conversion, A "Other Business Entity" into a "Florida Li | | |
| Please return all correspondence concernir | ng this matter to: | |
| ERNESTO CHACIN | | |
| (Contact Person) | | |
| (Firm/Company) | | |
| 7200 N.W. 114 AVENUE, #306 | | |
| (Address) | | |
| DORAL, FLORIDA 33178 | | |
| (City, State and Zip Code) gmoran @bell 800+h | 4 | |
| E-mail address: (to be used for future annual repor | | |
| For further information concerning this ma | atter, please call: | |
| Adam O. Kirwan, Esquire | _at (_407)_ | 210-6622 |
| (Name of Contact Person) | (Area Code an | d Daytime Telephone Number) |
| Enclosed is a check for the following amo | unt: | |
| \$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: | MAILIN | G ADDRESS: |
| Registration Section | | on Section |
| Division of Corporations Clifton Building | | of Corporations |
| Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 | | |
| Tallahassee, FL 32301 | . 41.41.465 | , |

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 Certific | cate of |
|--|----------------|
| Conversion is: | 12. |
| PLINGO INTERNATIONAL, CORP (Enter Name of Other Business Entity) | NVISION C |
| (Enter Name of Other Business Entity) | |
| 2. The "Other Business Entity" is a CORPORATION | - OF 18 |
| (Enter entity type. Example: corporation, limited partnership, | 2000 P |
| general partnership, common law or business trust, etc.) | P |
| first organized, formed or incorporated under the laws of FLORIDA | PM 2: 26 |
| (Enter state, or if a non-U.S. entity, the name of the country) | 5 |
| | |
| on <u>11/09/2009</u> | . • |
| (Enter date "Other Business Entity" was first organized, formed or incorpo | rated) |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country und which it is now organized, formed or incorporated: | er the laws of |
| 4. The name of the Florida Limited Liability Company as set forth in the attached Article Organization: | es of |
| PLINGO INTERNATIONAL, LLC | |
| (Enter Name of Florida Limited Liability Company) | |
| 5. If not effective on the date of filing, enter the effective date: 03/28/2012 | |
| (The effective date: 1) cannot be prior to nor more than 90 days after the date this defiled by the Florida Department of State; <u>AND</u> 2) must be the same as the effective datached 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 conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting | |

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

| • , | | |
|---|--|--|
| n 1. | | |
| Signed this 21th day of ha | rch : 20/2 | |
| | Representative of Limited Liability Company | |
| Individual signing affirms that the facts constitutes a third degree felony as pro- | s stated in this document are true. Any false int | formation |
| C | presentative: | |
| Printed Name: Ernesto Chacin | oresentative: | |
| | <i>J</i> - | |
| this document are true. Any false inform | ss Entity: Individual(s) signing affirm(s) that the mation constitutes a third degree felony as prov | ie facts stated in vided for in |
| s.817.155, F.S. See below for required : | signature(s).] | |
| Signature: | Title: Manager | |
| Printed Name: Emesto Chacin | Title: Manager | |
| Signature: | Title: | <u> </u> |
| Printed Name: | Title: | _ |
| Signature: | Title: | |
| | | |
| Signature: Printed Name: | Title: | |
| | | |
| Printed Name: | Title: | |
| | | |
| Printed Name: | Title: | |
| If Florida Corporation: | | |
| Signature of Chairman, Vice Chairman, D | | |
| If Directors or Officers have not been sele | ected, an Incorporator must sign. | |
| If Florida General Partnership or Limi | ted Liability Partnership: | |
| Signature of one General Partner. | | |
| If Florida Limited Partnership or Limit Signatures of ALL General Partners. | ted Liability Limited Partnership: | SE DIVIS 12 |
| • _ | | ** |
| All others: Signature of an authorized person. | | SECRETARY DIVISION OF CO 12 MAR 13 |
| • | | PH OREGIN |
| Fees: | | <u>~</u> 등 등요 |

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

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

Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | |
|---|---|
| PLINGO INTERNATIONAL, LLC (Must end with the words "Limited Liability Company, the abbrev | viation "L.L.C.," or the designation "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the prin | cipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| #306 DORAL, FLORIDA 33178 ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered | 7200 N.W. 114 AVENUE #306 DORAL, FLORIDA 33178 Office, & Registered Agent's Signature: ed Agent. You must designate an individual or another |
| business entity with an active Florida registration.) The name and the Florida street address of the reg | gistered agent are: |
| Ernesto Chacin | Name |
| 7200 N.W. 114 AVEN Florida street address (I | NUE, #306 P.O. Box <u>NOT</u> acceptable) |
| DORAL City, S | FL 33178 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

DIVISION OF CORPORATIONS

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 | Ivame and Address. | |
| "MGRM" = Managing N | ember | |
| MCD | Function Observe | |
| MGR | Ernesto Chacin 7200 N.W. 114 Avenue, #306 | |
| | Doral, Florida 33178 | |
| | polar, 1101104 00 110 | |
| MGR | Marianela Chacin | |
| | 7200 N.W. 114 Avenue, #306 | |
| | Doral, Florida 33178 | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| (Use attachment if neces | ary) | |
| | f other than the date of filing: 03/28/2012. | |
| TICLE V: Effective date, | other than the date of filing: | |
| e effective date: 1) canno | (OPTIONAL) be prior to nor more than 90 days after the date this document is fi | led by |
| | ate; AND 2) must be the same as the effective date listed in the att | |
| | effective date listed therein.) | |
| | | |
| <u>QUIRED</u> SIGNATURE; | | |
| | | |
| A | | |
| Signature of a me | nber or an authorized representative of a member. | |
| (In accordance with section t | 8.408(3), Florida Statutes, the execution of this document constitutes an affirmatio | n under |
| the penalties of perjury that | e facts stated herein are true. I am aware that any false information submitted in a | ii unaci |
| document to the Departmen | of State constitutes a third degree felony as provided for in s.817.155, F.S.) | P==1 |
| | | = |
| FR NEST | N N | SEQ 338 |
| ERNEST | Typed or printed name of signee | SECRE. |
| <u>ERNEST</u> | Typed or printed name of signee | SECRETAR HVISION OF C |
| <u> Ernest</u> | Typed or printed name of signee Page 2 of 2 | SECRETARY OF CORF |
| _ERNEST | Typed or printed name of signee | SECRETARY OF SI |