# 12000065976

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<b>⇒</b> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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MAY 1 6 2012 T. HAMPTON

### **COVER LETTER**

Registration Section

TO:

Division of Corporations	
SUBJECT: Fenkell Ostrow (Name of Ro	3 Fenkel Enterprises LLC. esulting Florida Limited Company)
	icles of Organization, and fees are submitted to convert an ited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning	this matter to:
Michael Fenkell  (Contact Person)  Fenkell Ostrow & Fenker  (Firm/Company)	ell Enterprises LLC.
1010 Semmola Drive 1p	t1204
(Address)  Fort Lauderdale FL 3  (City, State and Zip Code)  JOEL & PC Dyahoo. Con  E-mail address: (to be used for future annual report re	
For further information concerning this mat	ter, please call:
Joel Fenkell	at (760) 529-1284
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amoun	nt:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\$155.00 Filing Fees and Certificate of Status	3\$180.00 Filing Fees Sand Certified Copy Sertified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 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: Tentell Enterprises Incorporated.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a COPO ration (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of <u>Plaware</u> 5
on 1/24/11 (Enter state, or if a non-U.S. entity, the name of the country)
(Enter date "Other Business Entity" was first organized, formed or incorporated)
<ul> <li>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:</li> <li>4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:</li> </ul>
Fenkell Ostrow & Frenkell Enterprises 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 4 day of May	20. 17
Signed thist day of	_20 <u>12</u>
Signature of Member or Authorized Representa Individual signing affirms that the facts stated in to constitutes a third degree felony as provided for in	his document are true. Any false information
Signature of Member or Authorized Representative Printed Name: Michael Fenkell	Title: Co-Owner
Signature(s) on behalf of Other Business Entity: In this document are true. Any false information cons s.817.155, F.S. [See below for required signature(s)]  Signature:	
Printed Name Doel Fenkel	Title: Co-owner
Signature: Printed Name: Gary Ostrow	Title: Partner
Signature: Printed Name:	_ Title:
Signature: Printed Name:	
Signature: Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	_ 1 tue:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Clair Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:

All others: Signature of an authorized person.

Fees:

Certificate of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2

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

A	R	$\mathbf{T}$	IC	LE	Ι-	- N	am	e	:
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The name of the Limited Liability Company is:

Fenkell Ostrow B Fenkell Enterprises 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:
1010 Seminole Drive Apt 1704 Fort lauderdale FL 33304	1010 Semmole Drive Apt 1204 Fort Lauderdale FL 33304

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:

Name
Name
ADT 17 D

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

Fort lauderdale FL 33304

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 Lam 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

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

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(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 Certificate of Conversion, if an effective date listed therein.)

**REQUIRED SIGNATURE:** 

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Michael Jenkell
Typed or printed name of signee

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