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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:	
(XON)	genning.	

Office Use Only



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Effective Date 9-1-12

07/30/12--01044--015 **15U.U0

J. SAULSBERRY EXAMINER

'AUG 3 2012

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: LittleSaigon Financial Service:
(Name of Resulting Florida Limited Company)

TO:

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
Hung Q. Le (Contact Person)
LittleSaigon Financial Services, Inc. (Firm/Company)
4115 N SB 7 (Address)
Lauderdale Lakes, FL 33319 (City, State and Zip Code)
E-mail address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Hung Q. Le at (954) 673-9185 (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) \$150.00 Filing Fees and Certificate of \$180.00 Filing Fees and Certified 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: Little Saigon Financial Services, Inc. (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a COPOCATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida, Broward (Enter state, or if a non-U.S. entity, the name of the country)
on 05/06/2011 (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 Organization:
Little Saigon Financial Services, 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 27 _ day of 07 _ 20 _ 12 .
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: Printed Name: Hung G. Le Title: President
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:
Printed Name: Hung Q. Le Title: President
Signature: Printed Name: Hung Q. Le Title: President
Signature: Title:
Printed Name: Title:
Signature: Printed Name: Title:
Printed Name:1itle:
Signature:
Signature: Printed Name: Title:
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Signature:
Signature: Title:
·
Signature: Printed Name: Title:
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.
Fees:
Certificate of Conversion: \$25.00
Fees for Florida Articles of Organization: \$125.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)
Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited I	iability Company is:	
Little Saigor (Must end with the words Limited	Financial Liability Company, the abbrevi	Services, LLC ation "L.L.C.," or the designation "LLC.")
ARTICLE II - Address:		sipal office of the Limited Liability Company is:
Principal Office Address	<u>ı:</u>	Mailing Address:
4115 N SB 7 Lauderdale La 33319	kes, FL	
ARTICLE III - Register (The Limited Liability Company of business entity with an active Flo	annot serve as its own Registered	ffice, & Registered Agent's Signature: d Agent. You must designate an individual or another
The name and the Florida	street address of the regi	istered agent are:
:	Hung Q.	Le Jame
· ·	11484 SW 1 Florida street address (P	Oh CT O. Box NOT acceptable)
	Davie, City, St	FL , 33325 ate, 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

<u>Title:</u>		e and Address:
"MGR" = Manager "MGRM" = Managi		
MORW Manage	ing McMoci	
MG13	•	Hung Q. Le
		11484 SW 10th CT, Davie, FL 33325
		Pavie, 1 = 03020
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(1)		
(Use attachment if n		
ΓΙCLE V: Effective d	ate, if other than the	e date of filing: 09101 2012
	: 	(OPTIONAL)
e effective date: 1) car		\mathbf{v} more than 00 days after the date this decument is filled 1
e enective date: 1) car Florida Department o	of State; AND 2) n	or more than 90 days after the date this document is filed to must be the same as the effective date listed in the attache
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e effective date: 1) car Florida Department of tificate of Conversion	of State; <u>AND</u> 2) n , if an effective date	or more than 90 days after the date this document is filed to must be the same as the effective date listed in the attache
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Florida Department of tificate of Conversion	of State; <u>AND</u> 2) m if an effective date RE:	or more than 90 days after the date this document is filed to must be the same as the effective date listed in the attache
Florida Department of tifficate of Conversion. OUIRED SIGNATUR Signature of a	of State; AND 2) m, if an effective date. RE: a member or an authorion 608.408(3). Florida	nust be the same as the effective date listed in the attached listed therein.)

Page 2 of 2

Typed or printed name of signee