# L13000005112

(Re	equestor's Name)	
(A	ddress)	
, <b>(</b> A	ddress)	
(C	ity/State/Zip/Phone	<del>; #)</del>
. PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Nemi	



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12/27/12--01005--029 \*\*185.00

2012 DEC 26 AH 8: 45

Office Use Only

J. SAULSBERRY EXAMINER JAN 10 2013

# **COVER LETTER**

, ′	FO: Registration Section Division of Corporations		•	· •	1
:	SUBJECT: LTE Group, LLC				,
		of Resulting Florida Limited Company)	<del></del>		
٠		Articles of Organization, and fees are submitte Limited Liability Company" in accordance with ming this matter to:			
_	Delia Barcelo				
	(Contact Person)				
-	Eventus Marketing, Inc.		<b>Ž</b>	20	
	(Firm/Company)		- S	2012 DEC 26	أحد فاسبعة
-	5000 SW 75th Avenue, 4th Floor		表質	<u>E</u>	<u></u>
	(Address)			26	
1	Miami, Florida, 33155		2		Ti
•	(City, State and Zip Code	e)		æ	
_	lbarcelo@eventuslive.com		S.A	£5	
I	E-mail address: (to be used for future annual rep	ort notifications)			
1	For further information concerning this r	natter, please call:			
	Delia Barcelo	at ( 305 ) 668-4343 ext 318			
-	(Name of Contact Person)	(Area Code and Daytime Telephone Number	r)		
[	Enclosed is a check for the following am	iount:			
) د	\$150.00 Filing Fees \$25 for Conversion & \$125 for Articles of Organization)	\$180.00 Filing Fees and Certified Copy 2 \$185.00 Filing Fees, Certified Copy, and Certificate of Status			
5	STREET ADDRESS:	MAILING ADDRESS:			
	Registration Section	Registration Section			
	Division of Corporations	Division of Corporations P. O. Box 6327			
	Clifton Building 1661 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:  LTE Group, Inc.
(Enter Name of Other Business Entity)  2. The "Other Business Entity" is a corporation  [Enter Name of Other Business Entity]  [Enter Name of Other Business Entity]  [Enter Name of Other Business Entity]
2. The "Other Business Entity" is a corporation
(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
(Enter state, or if a non-U.S. entity, the name of the country)
on 06/04/2012
(Enter date "Other Business Entity" was first organized, formed or incorporated)
on 06/04/2012  (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:
n/a
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LTE Group, LLC
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: 12/21/2012  (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 18th day of December	20 <u>12</u>				
	presentative 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.817.455, fl.S.					
Signature of Member or Authorized Repres	sentative:				
Printed Name: Nelson J. Albareda	Title: Authorized Representative				
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 sign	hature(s).				
Signature:					
Printed Name: Nelson Alfaretia	Title: PD				
6900					
Signature:					
Printed Name: Mayra Soto	Title: AT				
Signature:	m/ 1				
Printed Name:	Title:				
Signatura	Title:				
Printed Name:	Title:				
rinited Name.	11(1c. == let 1   1)				
Signature:	26 E				
Printed Name:	Title:				
Signature:Printed Name:					
Printed Name:	Title:				
If Florida Companyllan					
If Florida Corporation: Signature of Chairman, Vice Chairman, Direct	otar ar Officer				
If Directors or Officers have not been selected					
The entered of Chinesis have not been selected	a, an incorporator mast orgin				
If Florida General Partnership or Limited	Liability Partnership:				
Signature of one General Partner.					
If Florida Limited Partnership or Limited Liability Limited Partnership:					
Signatures of <u>ALL</u> General Partners.					
All othors					
All others: Signature of an authorized person.					
Signature of an authorized person.					
Fees:					
<del></del>					
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				

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Liability Company	y, the abbreviation "L.L.C.," or the designation "LLC.")				
ARTICLE II - Address:					
The mailing address and street address o	f the principal office of the Limited Liability Company is				
Principal Office Address:	Mailing Address:				
5000 SW 75th Avenue	5000 SW 75th Avenue				
4th Floor	4th Floor				
Miami, FL 33155	Miami, FL 33155				
	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another				
(The Limited Liability Company cannot serve as its ov	wn Registered Agent. You must designate an individual or another				
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	of the registered agent are:				
(The Limited Liability Company cannot serve as its of business entity with an active Florida registration.)  The name and the Florida street address	wn Registered Agent. You must designate an individual or another				
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address Nelson J. Alba	of the registered agent are:				
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address Nelson J. Alba  5000 SW 75t	of the registered agent are:  areda  Name  th Avenue, 4th Floor address (P.O. Box NOT acceptable)				
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address Nelson J. Alba  5000 SW 75t	of the registered agent are:  areda  Name  A PROPERTY OF A				

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

ARŤICL	E IV	- Mana	ager(s)	or Mana	oing	Memb	ner(s	١:
AIVIIVE	7 E 7 E 7	. IAB 00 511 0	ugeil3)	OI MIGHI	ıgıng.	14 E C 111 F	,,,,	٠.

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MGRM	Nelson Albareda Living Trust 5000 SW 75th Avenue, 4th Floor Miami, FL 33155
MGRM	The Albareda Dynasty Trust  5000 SW 75th Avenue, 4th Floor Miami, FL 33155  ARE DEC.
<del></del>	Miami, FL 33155  7817 DEC 26 AM 8 45
(Use attachment if necessary)	
(The effective date: 1) cannot be pr	cor than the date of filing: 12/21/2012  (OPTIONAL)  rior to nor more than 90 days after the date this document is filed by AND 2) must be the same as the effective date listed in the attached ective date listed therein.)
(In accordance with section 608.408	or an authorized representative of a member.  (3), Florida Statutes, the execution of this document constitutes an affirmation under s stated herein are true. I am aware that any false information submitted in a
document to the Department of State  Nelson J. Albare	e constitutes a third degree felony as provided for in s.817.155, F.S.)