L170000082567

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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T SCHROEDER

COVER LETTER

Tallahassee, FL 32314

32301

2661 Executive Center

Circle Tallahassee, FL

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Article Poly 2005	cles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Conformation (Enter entity type. Example: corporation, limited partnershing general partnership, common law or business trust, etc.)	 p,
First organized, formed or incorporated under the laws of House (Enter state, or if a non-U.S. entity, the (date of organization, formation or incorporation)	ne name of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Ar Lenter Name of Florida Limited Liability Company)	ticles of Organization:
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date nor more the after the date this document is filed by the Florida Department of State; AND 2) is the effective date listed in the attached Articles of Organization, if an effective date. If the date inserted in this block does not meet the applicable statutory filing requirements, this dadocument's effective date on the Department of State's records.	must be the same as te is listed therein.)
5. The plan of conversion has been approved in accordance with all applicable statutes	•
 The "Converted or Other Business Entity" has agreed to pay any members having apprawhich such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	uisal rights the amount to
	10: 39 2000

Signed this 3 day of Hauh	,7			
Signed this 3 day of March	20			
Signature of Authorized Representative of Limit	ted Liability Company:			
Signature of Authorized Representative: 7 Printed Name: Haubel Enlique?	new finds			
Printed Name: Haubel Enligue	Title:Pusioner			
Signature(s) on behalf of Other Business Entity: [
Signature: Mer				
Printed Name: Walled & Dollage les.	Title: Resident	-		
Signature: Feel J allow	2			
Signature: July J dates O Printed Name: TS IDRO I OFTEN	Title:	_		
Signature:Printed Name:	Title:	-		
Signature:Printed Name:	Title:	<u> </u>		
Signature:				
Printed Name:		-		
Signatura				
Signature: Printed Name:	Title:	_		
If Florida Corporation:				
Signature of Chairman, Vice Chairman, Director, or				
If Directors or Officers have not been selected, an Inc	corporator must sign.			
If Florida General Partnership or Limited Liabili	ty Partnership:			
Signature of one General Partner.				
If Florida Limited Partnership or Limited Liability	ty Limited Partnership:	35	ā. j	
Signatures of <u>ALL</u> General Partners.			<u>.</u> .	;
All others:		. • 	7 ((A) (B)	•
Signature of an authorized person.			• ,	
Fces:			21 735	***
Articles of Conversion:	\$25.00		<u> </u>	
Fees for Florida Articles of Organization:	\$25.00 \$125.00	35	.3.7	
Certified Copy:	\$30.00 (Optional)			
Certificate of Status:	\$5.00 (Optional)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Meye L.L.C.	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	

ARTICLE II - Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
250 N.W 218 Waif	250 NW 218 Way
Pembaoke Pines	Pembroke Pines
FL 33029	FL 33029

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:

MARIBE ENRIQUEZ

Name

250 N.W 218 Way

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

Pembaske Pines FL 33029

City 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 605, F.S..

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager $M6R$	Hanibel Enriquez 250 NW 218 Way Pembroke Pines H. 33029
(Use attachment if necessary)	
prior to or 90 calendar days after the dat	ist be specific and cannot be more than five business days e of filing.) et the applicable statutory filing requirements, this date will not be listed as the
REQUIRED SIGNATURE:	200
Me	
This document is executed in I am aware that any false info	per or an authorized representative of a member. a accordance with section 605.0203 (1) (b), Florida Statutes. armation submitted in a document to the Department of State any as provided for in s.817.155, F.S.
Maribe	Syped or printed name of signee

Filing Fees
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

Company: