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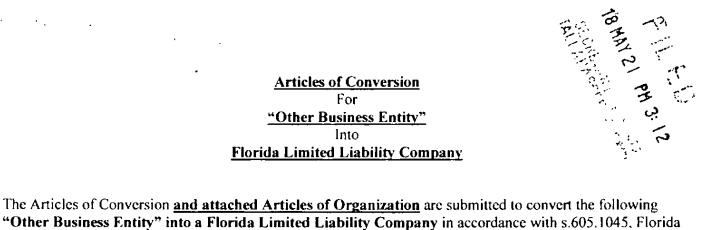
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COVER LETTER

TO:	New Filing Son Division of C		·		
SUBJ	JECT:	I Den	S 2 MAR	Ket LLC	_
	 -	(Name of Res	sulting Florida Limited Con	npany)	
				d fees are submitted to eccordance with s. 605.1	
Please	e return all corre	espondence concernin	g this matter to:		
	Micha	el P. Knc (Contact Person)	zman K		
	1 D	(Firm/Company)	, n/4 t		
	2328	(Firm/Company)	2 d .		₽00
		Saddlen (Address)			10000000000000000000000000000000000000
	Fennan	City, State and Zip Code)	nid4 32034		721
h.	16 - KACZ	MANUK C Mu	1 IDEAS 2 MAE	Ket. Com	TIL THE SECRETARY 21 PH 3:
	irther informatio	on concerning this ma	tter inlease call:		: 12
	Sav	u e	_at (978) 2	21 - 2787 12 · 5700 (time Telephone Number)	_
	(Name of Conta	ct Person)	(Area Code) (Day	rtime Telephone Number)	
		or the following amou a bank located in the		sed by this office must	be payable in US
(\$25 fc & \$125	60.00 Filing Fees or Conversion 5 for Articles anization)	2\$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	
New I Divisi Clifto 2661	EET ADDRESS Filing Section ion of Corporat on Building Executive Cent nassee, FL 323	ions er Circle	MAILING A New Filing S Division of C P. O. Box 63: Tallahassee,	ection Corporations 27	

Articles of Conversion "Other Business Entity"



1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: IDEAS 2 MARILET LLC. (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a Limited Limbility Company

(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) First organized, formed or incorporated under the laws of Delawane (Enter state, or if a non-U.S. entity, the name of the country) on 711/2004 (LLC)
(date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: (Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date: 61118 (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

5. The plan of conversion has been approved in accordance with all applicable statutes.

Statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 31 day of mny	_ 20 <u> 8 </u>	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative:		-
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	20 6
Signature: Michael P. Kaczmanu II	Title: Ou ner	# 21
Signature:		
Signature: Printed Name:	Title:	رب
Signature:		. 72
Signature:Printed Name:	Title:	<u> </u>
Signature:Printed Name:	Title:	_
Signature:Printed Name:	Title:	-
Signature:Printed Name:		-
Printed Name:	Title:	-
If Florida Corporation: Signature of Chairman, Vice Chairman, Director. or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	I Liability Company is:		
(Must cont	Ideus a	MARILE + LL	. C
ADTICLE II Address	ç.		
Principal Office Addre	<u>'88:</u>	Mailing Address:	
2328 Sad Fennedina APTIL F ARTICLE III - Registe (The Limited Liability Company business entity with an active F	cannot serve as its own Register	Office, & Registered A	
The name and the Florid	la street address of the re	egistered agent are:	
<u> </u>	Michael P. Name	Knezmnnell	-
	328 Speldley rida street address (P.O.		
<u> </u>	Fennandina City	FL 32034 Zip	-
Havina hoon named a	s registered agent and to	accent semice of proces	es for the above stated limited

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)

(CONTINUED)

"MGR" = Manager	
	िस स राज्या स्टिन्स
-	
CLE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
	P. Kasumil
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	r an authorized representative of a member se with section 605.0203 (1) (b). Florida Statutes. I am aware ument to the Department of State constitutes a third degree for
Signature of a member of any false information submitted in a doc as provided for in s.817.155, F.S.	r an authorized representative of a member se with section 605.0203 (1) (b). Florida Statutes. I am aware

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

ARTICLE IV-