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(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

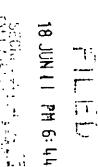
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COVER LETTER

TO:	New Filing Section
	Division of Corporations 4
SUBJI	ECT: KRISTGIL INVESTMENT, LLC
	(Name of Resulting Florida Limited Company)

The enclosed Articles 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. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Please return all corre	spondence concerning	g this matter to:		
GILBERTO 1 KRISTGIL PO BOX 5 MIAMI	(Contact Person) (Firm/Company) (Address) (Address) (Address) (Address)	TERDO ENT, LLC 256 FFRCE.COM		18 JUN 11 PH 6: 44
	on concerning this mar	tter, please call:	74-8409	
		int: (All checks proces	vtime Telephone Number) sed by this office must be	: payable in US
☐ \$150,00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$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	
STREET ADDRESS	S:	MAILING A	ADDRESS:	

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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.

(Enter Name of Other Business Entity) (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>CORPORATION</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of FLOR TOA
on 6 by 0 f MAY 1998 (Enter state, or if a non-U.S. entity, the name of the country) (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: (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.
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 $\frac{5\#}{5}$ day of $\frac{5}{5}$	20
Signed this <u>UNE</u> day of <u>UNE</u>	_ 201_0
Signature of Authorized Representative of Lingi	ted Liability Company:
H	i O fat
Signature of Authorized Representative:	DAIL MANAGER
Signature(s) on behalf of Other Rusiness Entity: 1	
Signature: Printed Name: Ott 195 8 to R to To I to E to E	
Printed Name: Oth BERTO R. Inquiter	Dride: PRESTUENT/ DIRECTOR
Signature:	
Signature:Printed Name:	Title:
**	
Signature: Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation:	2.55
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc	
in the clore of Officers have not been selected, an inc	corporator musi sign.
<u>f Florida General Partnership or Limited Liabilit</u>	<u>v Partnership:</u>
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:
Signatures of <u>ALL</u> General Partners.	

All others: Signature of an authorized person.

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

RESTGEL TNYESTMENT LLC

(Must contain the words "Limited Liability Company, "L.I. C.," or "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:
1471 S.W. 104 STREGT	PO BOX 565746 MEAME, FL 33256

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:

TLBERTO R. TZQUTERDO

Name

1471 S.W. 104 STREET

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

MIAMI FL 33176

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 deties, 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 Sylvature (REQUIRED)

(CONTINUED)

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

"MGR" = Manager	
MGR	C-ILBERTO R. TZ9UTERDO PO BUX 5657769UTERDO MIAMITIFI 33256
(Use attachment if necessary)	THE JUH
CLE V: Other provisions, if any,	

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, 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.

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)