# P08000031315

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
-							

Office Use Only



900119770319

03/10/08--01040--011 \*\*60.00

900119770319 03/26/08--01004--012 \*\*45.00

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SECRETARY OF STATE
TALL AHASSEF FLORIDA

# **COVER LETTER**

TO: Registration Division of C								
SUBJECT:	FOSSI BRA	. CHO INVES	THIGHT UC					
	(Name of Florida	a Limited Liability Compan	y)					
		d fee(s) are submitted t er Business Entity" in a						
Please return all corr	respondence concernin	ng this matter to:						
Marian	(Contact Person)	<u> </u>						
Marianda Bracho P.A. (Firm/Company)								
3824 50	M Simcon (Address)	Cr.						
W65TO	N To 33 City, State and Zip Code)	331						
For further informati	on concerning this ma	atter, please call:						
Mayiank (Name of Contact I	la Bracho Person)	at (954) _2 (Area Code and D	408975 Paytime Telephone Number)					
Enclosed is a check	for the following amou	unt:						
\$25.00 Filing Fee	\$30.00 Filing Fee and Certificate of Status	\$55.00 Filing Fee and Certified Copy	\$60.00 Filing Fee, Certified Copy, and Certificate of Status					
STREET ADDRESS:		MAILING A						
Registration Section		Registration Section						
Division of Corporat Clifton Building	ions	Division of Corporations P. O. Box 6327						
2661 Executive Cent	er Circle	Tallahassee, FL 32314						
Tallahassee, FL 323			<b></b>					



March 12, 2008

MARIANGELA BRACHO PA 3824 SAN SIMEON CIRCLE WESTON, FL 33331

SUBJECT: MARIANGA BRACHO, P.A.

Ref. Number: W08000012920

We have received your document for MARIANGA BRACHO, P.A. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You submitted the wrong form. I am enclosing the proper form. Note the additional filing fee.

The Certificate of Conversion must state the effective date of the conversion. The effective date cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date of the conversion under the laws governing the other business entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 708A00015116

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

# Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
Fossi Bracho Investment LLC
(Enter Name of Other Business Entity) LOS-13034
2. The "Other Business Entity" is a
(Enter entity type. Example: limited liability company, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of
02/08/2005
(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 Profit Corporation as set forth in the <u>attached Articles of</u> Incorporation:
Marianela Bracho P.A.
(Enter Name of Florida Profit Corporation)

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 Incorporation, if an effective date is listed therein.)
Signed this
Signature:
(Must be signed by a Chairman Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator.)
Printed Name: Mariane GBradhite: Manager

# Fees:

Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: \$35.00 \$70.00

\$8.75 (Optional) \$8.75 (Optional) Certificate of Status:

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TALLAHASSEE FLORIDA

#### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

Marianela Bracho P.A.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3824 San Simcon Cr, WESTON, 72, 33331

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate

#### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Marianela Bracho, President

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

Marianela Bracho 3824 San Simson Gr, WESNN, Fr. 33331

ARTICLE VII	INCORPORAT	<u>OR</u>			
The <u>name and add</u>	lress of the Incorpor	ator is:			
Mai	riangla	Brach	<b>o</b>		
3824	rianela Sau Sin	neon Cr	WEST	VN FC	<i>3333</i> 1
Having been named o	as registered agent to d ificate, I am familiar wit	accept service of pro-	cess for the above	stated corporation	at the place
Signatur	e/Registered Agent			03/17/1	28
	e/Ineprporator			13/17 Date	108
7	7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -				

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