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| (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:

L. SELLERS

JUL -9 2010

EXAMINER

Office Use Only



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SEGRETARY OF STATE

COVER LETTER

| TO: | Registration Section Division of Corporations | | | | |
|---------------|--|---|---|--|--|
| SUBJ | ECT: Restaurant Of South E | Beach Corporation | , | | |
| | Name of Result | ing Florida Profit Corporation | on | | |
| conve | nclosed Certificate of Conversion, Art an "Other Business Entity" into a 115, F.S. | | | | |
| Please | e return all correspondence concerni | ng this matter to: | | | |
| | Sloane J Thilloy | | | | |
| | Contact Person | | | | |
| | Restaurant of South Beach | n LLC | | | |
| | Firm/Company | | | | |
| | 1740 Collins Avenue | | | | |
| | Address | | | | |
| | Miami Beach, FL 3313 | 39 | | | |
| | City, State and Zip Code | | | | |
| | thilloy@aol.com | | | | |
| £ | -mail address: (to be used for future annual | report notification) | | | |
| For fu | orther information concerning this m | atter, please call: | | | |
| | Sloane J Thilloy | at (786) | 333-5332 | | |
| | Name of Contact Person | Area Code and Dayt | ime Telephone Number | | |
| Enclos | sed is a check for the following amo | ount: | | | |
| √ \$10 | 5.00 Filing Fees \$\int_\$\$113.75 Filing Fees and Certificate of Status | \$113.75 Filing Fees and Certified Copy | \$122.50 Filing Fees, Certified Copy, and Certificate of Status | | |
| | EET ADDRESS: tration Section | MAILING A | | | |
| | on of Corporations | - | Registration Section Division of Corporations | | |
| Clifto | n Building | P. O. Box 63 | P. O. Box 6327 | | |
| 2661 | Executive Center Circle | Tallahassee. | FL 32314 | | |

Tallahassee, FL 32301

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: | | | | | |
|---|--|--|--|--|--|
| Restaurant Of South Beach LLC | | | | | |
| Enter Name of Other Business Entity | | | | | |
| 2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: limited liability company, 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) | | | | | |
| May 17, 2010 . | | | | | |
| 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 Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> | | | | | |
| Restaurant Of South Beach Corporation | | | | | |
| 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.) | | | | | |

Page 1 of 2

| Signed | I this22 | day of | June | , 20_10 | | |
|---|-------------|------------------|--------------|--|--|--|
| Required Signature for Florida Profit Corporation: | | | | | | |
| Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Printed Name: Sloane J Thilloy Title: President | | | | | | |
| Frintec | i Name: | Sloane J Millioy | 于 """ | Fresident | | |
| Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).] Signature: | | | | | | |
| Signatu Printed | ure: 1 Sløa | ne J Thilloy | | Title: MS | | |
| | | 9 | | | | |
| Printed | Name: | | | Title: | | |
| | | | | | | |
| Printed | Name: | | | _ Title: | | |
| Signati | ıre. | | | | | |
| Printed | l Name: | | | Title: | | |
| | | | | | | |
| Signatu | ure: | | | _ Title: | | |
| Printed | l Name: | | | _ Title: | | |
| Signatu | are: | | | | | |
| Printed | Name: | | | Title: | | |
| If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. | | | | | | |
| If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. | | | | | | |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representative. | | | | | | |
| All oth Signatu | | orized person. | | | | |
| Fees: | | | oration: | \$35.00 \$70.00 \$ 8.75 (Optional) \$ 8.75 (Optional) | | |

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:

Restaurant Of South Beach Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1740 Collins Avenue
Miami Beach, FL 33139

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Operate a restaurant business.

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):

Sloane J Thilloy, 1740 Collins Avenue, Miami Beach, FL, 33139, President

ARTICLE VI REGISTERED AGENT

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

Sloane J Thilloy, 1740 Collins Avenue, Miami Beach, FL, 33139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sloane J Thilloy, 1740 Collins Avenue, Miami Beach, FL, 33139

THE JUL -8 PH 3: 12
SECRETARY OF STATE

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

X June 27, 201

Date

X June 2720/0