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(Address)

(City/State/Zip/Phone #)

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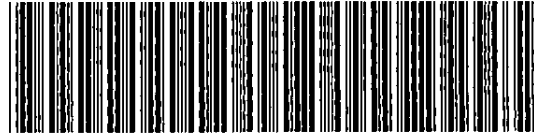
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Conversion

1.

Loss Technology Services, Inc.

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**LOSS TECHNOLOGY SERVICES, INC.
CERTIFICATE OF CONVERSION**

The undersigned, desiring to convert a Florida domestic corporation into a Florida limited liability company in accordance with Florida Statutes Section 607.1113, do hereby submit this Certificate of Conversion:

1. **Name of corporation.** The name of the corporation is Loss Technology Services, Inc., a Florida corporation (the "Corporation"), incorporated under the laws of Florida on January 27, 2004. P04000019545

2. **Converted Entity.** The Corporation is hereby converted into a Florida limited liability company (the "Limited Liability Company"). The name of the Limited Liability Company into which the Corporation is hereby converted is:

Loss Technology Services, LLC

3. **Compliance with Florida Statutes.** The Corporation has converted into the Limited Liability Company in compliance with Chapter 607 of the Florida Statutes, and the conversion complies with the applicable laws governing the Limited Liability Company.

4. **Plan of Conversion.** The Plan of Conversion was approved by the Corporation in accordance with Chapter 607 of the Florida Statutes.

5. **Consent of Shareholder.** The consent of the sole shareholder who, as a result of the conversion, is now a member of the Limited Liability Company was obtained pursuant to Florida Statutes Section 607.1112(6).

6. **Effective Date.** The conversion shall be effective when these Articles are filed with the Florida Department of State.

7. **Principal Office of Limited Liability Company.** The Limited Liability Company's principal office address is:

9570 Regency Square Blvd., Suite 410
Jacksonville, FL 32225

8. **Appraisal Rights.** The Limited Liability Company has agreed to pay any shareholders having appraisal rights the amount to which they are entitled under Florida Statutes Sections 607.1301-607.1333.

IN WITNESS WHEREOF, the undersigned have executed this Certificate of Conversion this 1st day of February, 2014.


Edwin T. Nelson
President, Chief Operating Officer and Secretary


Edwin T. Nelson
as Authorized Representative

SGR/11647850.1

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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LOSS TECHNOLOGY SERVICES, LLC

ARTICLES OF ORGANIZATION

The undersigned, desiring to form a limited liability company under and pursuant to the Florida Revised Limited Liability Company Act, Chapter 605, does hereby adopt the following Articles of Organization:

**ARTICLE I
NAME**

The name of the limited liability company is Loss Technology Services, LLC (the "Company").

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal place of business of the Company is:

9570 Regency Square Blvd., Suite 410
Jacksonville, Florida 32225

**ARTICLE III
REGISTERED AGENT AND OFFICE**

The street address of the Initial Registered Office of this Company in the State of Florida shall be 50 N. Laura Street, Suite 2600, Jacksonville, Florida 32202. The name of the Initial Registered Agent of this Company at the above address shall be Adam J. Buss.

IN WITNESS WHEREOF, the undersigned person has executed these Articles of Organization this 1 day of FEBRUARY, 2014.


Edwin T. Nelson, as authorized representative

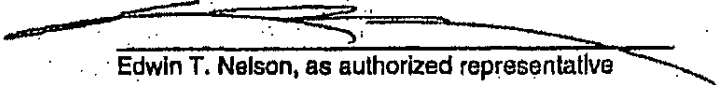
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TALLAHASSEE FLORIDA

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN FLORIDA,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

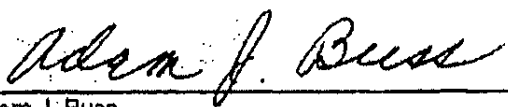
In compliance with Section 605.0113, Florida Statutes, the following is submitted:

That Loss Technology Services, LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at 9570 Regency Square Blvd., Suite 410, Jacksonville, Florida 32225, has named Adam J. Buss as its agent to accept service of process within Florida.


Edwin T. Nelson, as authorized representative

Date: 2/1/, 2014

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, the undersigned hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of his duties.


Adam J. Buss

Date: 2/1/, 2014

CLERK OF STATE
TALLAHASSEE FLORIDA

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