

P15000032845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/07/15--01032--022 **113.75

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15 APR - 7 PM 3.20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/10/15

CONVERSION

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOW VOLTAGE OF FLORIDA, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LIDIA FERNANDEZ

Name of Person

FASTWIR CORP.

Firm/Company

11250 NW 25 ST SUITE 100

Address

MIAMI, FL 33122

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (305) 599-0839
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| ☐ \$125.00 Filing Fee | ☐ \$130.00 Filing Fee &
Certificate of Status | ☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | ☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|---|

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 APR - 7 PM 3.20

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

FILED
15 APR -7 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Certificate of Conversion **and attached Articles of Incorporation** 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:

LOW VOLTAGE OF FLORIDA, LLC

Enter Name of Other Business Entity L13000102152

2. The "Other Business Entity" is a LOW VOLTAGE OF FLORIDA, INC
(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)

on 07/18/2013
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:

MIAMI FLORIDA

4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

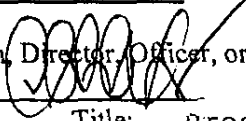
LOW VOLTAGE OF FLORIDA, INC

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.)

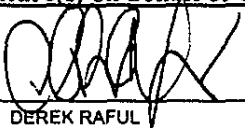
Signed this 30 day of MARCH, 2015

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: DEREK RAFUL Title: President

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: 
Printed Name: DEREK RAFUL Title: MMGER

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
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 others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

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

15 APR -7 PM 3-20

ARTICLE I NAME

The name of the corporation shall be:

LOW VOLTAGE OF FLORIDA, INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

9802 NW 80TH AVE # F-36

9802 NW 80TH AVE # F-36

HIALEAH GARDENS, FL 33016

HIALEAH GARDENS, FL 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation may engage in instalation and services of
security cameras, burglar and fire alarms, monitoring alarms and networks
and all lawful activities or business permitted under the laws
of the United States, the State of Florida any other state, country, territory or nation.

ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES \$ 1.00 PER VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RAFUL,DEREK - President

Name and Title: _____

Address: 9802 NW 80TH AVE # F-36

Address: _____

HIALEAH GARDENS, FL 33016

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: DEREK RAFUL

Address: 9802 NW 80TH AVE # F-36

MIAMI, FL 33173

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DEREK RAFUL
Address: 9802 NW 80TH AVE # F-36
HIALEAH GARDENS, FL 33016

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



Required Signature/Registered Agent

03/30/2015

Date

I submit this document and affirm that the facts stated herein are true. 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.



Required Signature/Incorporator

03/30/2015

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA