106000017745

(Re	questor's Name)	
		
(Ad	ldress)	
(Ad	ldress)	
`	ŕ	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



900064633519

2006 IAM 3 I AM II 36



COVER LETTER

TO: Registration Of Division of Office (Control of Control of Cont	on Section f Corporations			
SUBJECT:	VigicANT TECHNO	d Liability Company)		
The enclosed Articl	es of Organization and fee(s) are s	submitted for filing.		
Please return all cor	respondence concerning this matte	er to the following:		
	JULIE VE	(Name of Person)		
	((Name of Person)		
<u> </u>	VIGILANT	TERHNOLOGIES, LI	٠.د	
	•	(Firm/Company)		
177	LI Penman Ro.			2006
		(Address)		JAN OR O
J	CICSONVILLE BEACH	1. FL. 32250	3	3
	(City	/State and Zip Code)		200
For further informat	ion concerning this matter, please	call:		2006 JAN 31 AM 11: 37
MICHAEL	Johnson Jame of Person)	at (904) 610-	1460	
(N	lame of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a chec	k for the following amount:			
▼ \$125.00 Filing F × → • Re6	Certificate of Status STATE CEUT DENGHATIN Mailing Address Registration Section	S155,00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Certificate of Statu Certified Copy (additional copy is one	s &
CERTIFICAT	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

CERTIFICATE OF CONVERSION

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the <u>attached articles of organization</u> and this certificate of conversion to convert to a Florida limited liability company:

FIRST: The name of the unincorporated business immediately prior to filing this document	was:	
Vigilant Technologies, LLC		
SECOND: The date on which and the jurisdiction in which the unincorporated business was created or otherwise came into being are: A. Date: September 14, 2004 B. Jurisdiction: Commonwealth of Virginia		
C. If different from the above noted jurisdiction, the jurisdiction immediately prits conversion:		0
THIRD: The name of the limited liability company as set forth in the <u>attached</u> articles of organization is:	2006 JAN 3	JO NGISIAN
Vigilant Technologies, LLC		
Signature of a Member or an Authorized Representative of a Member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	AM II: 37	TOWATION

FILING FEES:

Typed or Printed Name of Signee

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Filing Fee for Registered Agent Designation \$ 25.00 Filing Fee for Certificate of Conversion \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

5 5.00 Certificate of Status (optional)

Michael E. Johnson

(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Wigi URNT TECHNOLOGIES, (Must end with the words "I imited Liability Company," Limited	LL C . Company" or their abbreviation "LLC," or "L.C,")
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1721 PENMAN RD. TACKSONVILLE BEACH, FL. 32250	JACKSONVILLE BEACH, FL. 32250
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registerousiness entity with an active Florida registration.) The name and the Florida street address of the re REGISTATION REGISTATION REGISTATION.) Name 2772 CLAIRBOR Florida street addr	Office, & Registered Agent's Signature: red Agent You must designate an individual or another Signature:
The name and the Florida street address of the re	gistered agent arc:
RANGEL : Name	PILLER WANGOLDENT Group, LLP = SERE
2772 CLAIRBOR Florida street addr	ess (P.O. Box NOT acceptable)
JACKSONVILLE City. State, ar	3Z2Z3
,	event somice of moves for the above stated limited

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGRM	Michael Johnson
	1721 Penman Road
	Jacksonville Beach, FL 32250
	JAN JAN
	<u> </u>

Use attachment if necessary)	
LE V: Effective date, if other the fective date is listed, the date is	nan the date of filing: (OPTION nust be specific and cannot be more than five business d
LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.)	nan the date of filing: (OPTION
LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.)	nan the date of filing: (OPTION
LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE:	nan the date of filing: (OPTION nust be specific and cannot be more than five business di
fective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume)	nan the date of filing: (OPTION

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