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| Special Instructions to Fi | ling Officer:    |             |
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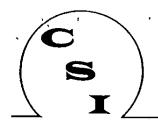


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### Control Systems & Instrumentation

"Your Complete Control Solutions Headquarters"

2 April 2007

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

Re: Conversion of Florida Profit Corporation into Florida LLC

Dear Customer Service Representative,

Please find our information printed below, for inquires that may be need for this conversion process to occur. We ask, if any questions arise during this process and you chose to contact us via telephone, please used the cell phone number listed on your "Cover Letter", 850.206.0631.

Sincerely

Phil W Jowers

## COVER LETTER

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: Control Systems & Instrumentation (Name of Resulting Florida Limited Company)  |
| The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.   |
| Please return all correspondence concerning this matter to:   |
| Philip Warren Jowers (Contact Person)   |
| Control Systems + Instrumentation<br>(Firm/Company)   |
| 3170 Oak Shadow (Address)   |
| Pensacola, FL 3750/<br>(City, State and Zip Code)   |
| For further information concerning this matter, please call:  |
| Philip W Jowers at (850) 206 0631 (Name of Contact Person) (Area Code and Daytime Telephone Number)   |
| Enclosed is a check for the following amount:   |
| \$150.00 Filing Fees (\$25 for Conversion & and Certificate of & and Certified Copy & Certified Copy, and & \$125 for Articles of Organization)  \$155.00 Filing Fees and Certified Copy & Certified Copy, and Certificate of Status                  |
| STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 |

### **Certificate of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

| 1. The name of the "Other Business Entity" immediately prior to the filing of this  |
|---|
| Certificate of Conversion is: Control Sustans & Instrumentation tue.  |
| (Enter Name of Other Business Entity)   |
| Certificate of Conversion is:  (Enter Name of Other Business Entity)  2. The "Other Business Entity" is a   Corporation  (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.) |
| first organized, formed or incorporated under the laws of Flori Ja  (Enter state, or if a non-U.S. entity, the name of the country)   |
| on 22 Dec 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 Limited Liability Company as set forth in the attached Articles of Organization:   |
| Control Systems of Instrumentation LLC (Enter Name of Florida Limited Liability Company)  |
| (Enter Name of Florida Limited Liability Company)   |

| 5. If not effective on the date of filing, enter the effective date: 9 April 01  (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 Organization, if an effective date is listed therein.) |
|---|
| Signed this 16th day of March 2007.   |
| Signature of Authorized Person: Phil W Journs  Printed Name: Phil W. Journs Title: President  |
| Printed Name: Mil W. Jowes Title: President   |
|   |
| Fees:   |

Page 2 of 2

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Certificate of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Organization:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

| The name of the Limited Liability Company is:  |
|--|
| Control Systems + Instrumentation LLC<br>(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")   |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  |
| Principal Office Address: Mailing Address:   |
| 3170 Oak Shadow Same<br>Pensacola, FL 32504  |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:    Philip W. Jowers   Property   Prope |
| 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   |

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| "MGR" = Manager<br>"MGRM" = Managing Member  | Name and Address:   |
|--|---|
| MG2  | Puil W. Jowers  3170 Oak Shadow  Pensacola, FL 3250   |
| <del></del>  |   |
|  |   |
|  |   |
|  | •   |
| CLE V: Effective date, if other than the ONAL) effective date is listed, the date must as days prior to or 90 days after the date.   | be specific and cannot be more than five  |
| ONAL) effective date is listed, the date must ss days prior to or 90 days after the date is listed.  REQUIRED SIGNATURE:   | be specific and cannot be more than five ate of filing.)  |
| effective date is listed, the date must as days prior to or 90 days after the date is listed, the date must as days prior to or 90 days after the date is days prior to or 90 days after the date is days after the days | thorized representative of a member.  408(3), Florida Statutes, the execution firmation under the penalties of permity ated herein are true.) |
| onal) effective date is listed, the date must as days prior to or 90 days after the date must are selected by the days after t | thorized representative of a member.  408(3), Florida Statutes, the execution firmation under the penalties of permity ated herein are true.) |

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)