

LD7000068428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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07 JUN 29 AM 11:55

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CT  
a Wolters Kluwer business

CT  
1203 Governors Square Blvd.  
Tallahassee, FL 32301-2960

850 222 1092 tel  
850 222 7615 fax  
www.ctlegalsolutions.com

June 29, 2007

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

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07 JUN 29 PM 2:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Order #: 6965143 SO  
Customer Reference 1: 27056-1  
Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

CDA InterCorp (FL)  
Conversion  
Florida

CDA InterCorp LLC (FL)  
Formation  
Florida

> simultaneous ☺

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell  
Fulfillment Specialist  
Ashley.Mitchell@wolterskluwer.com

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF CONVERSION  
OTHER BUSINESS ENTITY  
INTO  
FLORIDA LIMITED LIABILITY COMPANY

This Certificate of Conversion and attached Articles of Organization 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 CDA InterCorp. 354357
2. The "Other Business Entity" is a corporation first incorporated under the laws of Florida on February 9, 1970.
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization is CDA InterCorp LLC.
4. The effective date of this Certificate of Conversion shall be June 30, 2007.

Dated: June 25<sup>th</sup>, 2007

  
Print Name: Gregory Rufus  
Title: Authorized Person

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

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

CDA InterCorp LLC

(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:**

450 Goolsby Blvd.  
Deerfield Beach, Florida 33442-3019

**Mailing Address:**

450 Goolsby Blvd.  
Deerfield Beach, Florida 33442-3019

**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:

C T Corporation System  
Name  
1200 South Pine Island Road  
Florida street address (P.O. Box **NOT** acceptable)  
Plantation, Florida 33324  
City, State, and Zip

*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..*

C T Corporation System

Connie B...  
Registered Agent's Signature (REQUIRED)

(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:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

TransDigm Inc.

1301 East 9th Street, Suite 3710

Cleveland, Ohio 44114

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
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.)

Gregory Rufus

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation  
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)