:407000126463

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



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INDITION DEC 20 P 2: 30
SECRETARY OF STATE
ALLAHASSEY OF STATE

A. LUNT

DEC 2 1 2007

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Aphelion Systems (Name of Resulting Fl	orida Limited Company)
The enclosed Certificate of Conversion, Artic convert an "Other Business Entity" into a "Fl accordance with s. 608.439, F.S.	cles of Organization, and fees are submitted to lorida Limited Liability Company" in
Please return all correspondence concerning	this matter to:
Johnathan Pavan (Contact Person)	
Aphelion Systems LLC (Firm/Company)	2001 O SECR TALLA
38439 5th Ave, #123 (Address)	HASS
Zephyrhills, FL 33542 (City, State and Zip Code)	P 2: 31 YOF STATE EE, FLORIDA
For further information concerning this matter	er, please call:
Johnathan Pavan (Name of Contact Person)	at (813) 435-3108 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount	:
	\$180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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: Johnathan R. Pavan DBA: Aphelion Systems (Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a <u>SOIE proprietorship</u> . (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 Florida (Enter state, or if a non-U.S. entity, the name of the country)	
on <u>08/19/2005</u>	
(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 No Articles of Organization:	
Aphelion Systems LLC	
(Enter Name of Florida Limited Liability Company)	

5. If not effective on the date of filing, enter the eff (The effective date: 1) cannot be prior to nor modocument is filed by the Florida Department of Seffective date listed in the attached Articles of Oblisted therein.)	ore than 90 days after the date the State; <u>AND</u> 2) must be the same a	as the
Signed this 18th day of December		
Signature of Authorized Person:	- R Paron	
Printed Name: Johnathan R Pavan Title:	Managing Member	<u>, </u>
Fees:	SEC; TALLA	2001
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$30.00 (Ontional) - '©	ZOOT DEC 20 D 3

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:
Aphelion Systems LLC (Must end with the words "Limited Liability Company," to "LLC.")	he abbreviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of th Liability Company is:	ne principal office of the Limited
Principal Office Address:	Mailing Address:
38439 5th Ave, #123 Zephyrhills, FL 33542	38439 5th Ave, #123 Zephyrhills, FL 33542
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Findividual or another business entity with an active Florida registration.)	Registered Agent. You must designate an
The name and the Florida street address of	the registered agent are
Johnathan P	avan 20 F
38439 5th A	/e, #123

Florida street address (P.O. Box NOT acceptable)

Zephyrhills, 33542

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..

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Johnathan Robert Pavan 38439 5th Ave, #123 Zephyrhills, FL 33542
	Z@O]
	DEC 20 P 2 LAHASSEE, F. 0
	(Use attachment finecessary)

ARTICLE V: Effective date, if other than the date of filing: 01/01/2008. (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.)

Johnathan R Pavan 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)