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(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zipir-Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: AGILESRC LLC		
(Na	ame of Resulting Florida Limited Company)	_
	ion, Articles of Organization, and fees are submitted ida Limited Liability Company" in accordance with	
Please return all correspondence con	cerning this matter to:	
Paul Teves		
(Contact Person	u)	
Sabre Compliance Services		
(Firm/Company	<u>')</u>	1200 -
960 N Tustin Street Suite 301		
(Address)		器豆.
Orange, CA 92867		JUN 10 PH 2: 50 ECRETARY OF STATE
(City, State and Zip	Code)	E G R
paul@sabre-services.com		2: ST 1:5
E-mail address: (to be used for future annua	l report notifications)	FREE SO
For further information concerning t	his matter, please call:	***
Paul Teves	at (714) 202-7552	
(Name of Contact Person)	(Area Code and Daytime Telephone Number)	
Enclosed is a check for the following	g amount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)		
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P. O. Box 6327	
2661 Executive Center Circle	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: AGILESRC LLC
(Enter Name of Other Rusiness Entity)
2. The "Other Business Entity" is a Limited Liability Company
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of Michigan (Enter state, or if a non-U.S. entity, the name of the country)
on <u>06/14/2006</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 Articles of Organization:
AGILESRC LLC
(Enter Name of Florida Limited Liability Company)
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 Organization, if an effective date is listed therein.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

Signed this 23rd day of May	20 <u>11</u> .	
	resentative of Limited Liability Company: nted in this document are true. Any false infored for in s.817.155, F.S.	rmation
Signature of Member or Authorized Representation Printed Name: Paul Teves	entative:	-
	ntity: Individual(s) signing affirm(s) that the ion constitutes a third degree felony as providuature(s).]	
Signature: Signature: Printed Name: Poul Toyles	Title: Authorized Representative	-
	,	
Printed Name:	Title:	<u>-</u> _
		_
Printed Name:	Title:	- 50 -4
		TES E TI
Signature:	Title:	JUN 10 CRETAR LAHASS
Printed Name:	1 ttle:	TARY AASSET
Signature:		Me a IT
Printed Name:	Title:	FISTO
Signature		PH 2: 50 SEE, FLORID
Printed Name:	Title:	- Su
		•
If Florida Corporation:	otor or Officer	
Signature of Chairman, Vice Chairman, Direct If Directors or Officers have not been selected		
	-, o. position inter e.g.,	
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	Liability Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2	

'ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
AGILESRC LLC (Must end with the words "Limited Liability Company, the abbrevia	ition "L.L.C.," or the designation "LLC.")	
ARTICLE II - Address: The mailing address and street address of the princi	ipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
3267 Progress Drive Orlando, FL 32826	3267 Progress Drive Orlando, FL 32826	
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	fice, & Registered Agent's Signature: Agent. You must designate an individual or another	
The name and the Florida street address of the regis	stered agent are:	
NRAI Services, Inc	ARETA ARETA	
N:	ame SSEY	
515 E. Park Ave	man R	
Florida street address (P.	O. Box NOT acceptable) O. Box NOT acceptable)	
Tallahassee	FL 32301	
City, Sta	ate, and Zip	
company at the place designated in this certificate, I agree to act in this capacity. I further agree to comp proper and complete performance of my duties, and it position as registered agent as provided for in Chapt Registered Age	I am familiar with and accept the obligations of my	
·		

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	Name and Address:
"MGRM" = Managing I	Member
MGR	Mark A Horn
	3267 Progress Drive
	Orlando, FL 32826
MGR	Jonathan Ehrlich
	3267 Progress Drive
	Orlando, FL 32826
	PH 2: 58 RY OF STATE SEE: FLORID
	70 N
	Sr D
(Use attachment if neces	ssary)
ARTICLE V: Effective date,	if other than the date of filing: (OPTIONAL)
	be prior to nor more than 90 days after the date this document is filed by
	tate; <u>AND</u> 2) must be the same as the effective date listed in the attached an effective date listed therein.)
Certificate of Conversion, in	in circuite date fisted therein.)
REQUIRED SIGNATURE:	
()	
Signature of a mo	ember or an authorized representative of a member.
the penalties of perjury that	08.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the facts stated herein are true. I am aware that any false information submitted in a of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Paul Teves	Authorized Representative
<u> </u>	Typed or printed name of signee