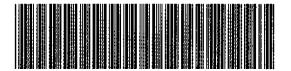
L11000085226

, (Re	questor's Name)	
· (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	• #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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B. BOSTICK

JUL 2 5 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Mikro Products LLC		
(Name of	Resulting Florida Lin	nited Company)
·	_	eation, and fees are submitted to convert an ompany" in accordance with s. 608.439, F.S.
Please return all correspondence concerning	ng this matter to:	
Robert Ryan		_
(Contact Person)		
(Firm/Company)		-
434 Nessler Way		_
(Address)		
Spring Hill, FI 34609		_
(City, State and Zip Code)		•
Rokar99@earthlink.net		
E-mail address: (to be used for future annual report	t notifications)	
For further information concerning this ma	atter, please call:	SECK ALLAN
Robert Ryan	at (352	746-7830
(Name of Contact Person)	(Area Code	and Daytime Telephone Number)
Enclosed is a check for the following amo	ount:	FLOOR D
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fe and Certified Cop	es \$185.00 Filing Fees, S
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Registra Division P. O. B	ING ADDRESS: ration Section on of Corporations rox 6327 assee, FL 32314

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	f
Conversion is:	
Mikro Products Inc. P11000059.79	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation	
(Enter entity type. Example: corporation, limited partnership,	
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)	
A C	
on <u>July 1, 2011</u> .	C
on July 1, 2011 (Enter date "Other Business Entity" was first organized, formed or incorporate	I)
erico) Constitution of the constitution	N
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:	
which it is now organized, formed or incorporated:	নু 🗇
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A A	10
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
Mikro Products 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 docum filed by the Florida Department of State; AND 2) must be the same as the effective date li 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 conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the	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 20 day of July	20//	
Signature of Member or Authorized Reg Individual signing affirms that the facts st constitutes a third degree felony as provid	ated in this document are true. Any fal	
Signature of Member or Authorized Represented Name: Robert D. Ryan		
Signature(s) on behalf of Other Business E this document are true. Any false informa s.817.155, F.S. [See below for required sign	tion constitutes a third degree felony as	hat the facts stated in s provided for in
Simon		
Signature: Printed Name: Robert D Rvan	Title: President	,
	TIMENOCIA	
Signature:		
Printed Name: Michael C. Ryan	Title: _{Treasurer}	
Signature:		
Printed Name:	Title:	
Signature:Printed Name:	77°41	
Printed Name:	I itle:	
Signature:Printed Name:		
Printed Name:	Title:	
		35°C
Signature:Printed Name:	F11.2	 58 F
Printed Name:	I itle:	
If Florida Corporation:		SS CS
Signature of Chairman, Vice Chairman, Dire	ctor, or Officer.	
If Directors or Officers have not been selecte	d, an Incorporator must sign.	
TERM I CO I I I I I I I I I I I I I I I I I		
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	32 11E 32
Signature of one General Latiner.		
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:	\$25.00	
Fees for Florida Articles of Organization:	\$125.00	
Certified Copy:	\$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	
	Page 2 of 2	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Mikro Products LLC (Must end with the words "Limited Liability Company, the abbreviation of the company of the	tion "L.L.C.," or the designation "LLC.")
ARTICLE II - Address: The mailing address and street address of the princi	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
776 N. Enterprise Pt Lecanto, Florida	434 Nessler Way Spring Hill, Florida
34461	34609
(The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.) The name and the Florida street address of the regis Robert D. Ryan Na 776 N. Enterprise Pt Florida street address (P.6)	ame SECRE 11 JUL 2
Lecanto	
	te, and Zip
company at the place designated in this certificate, I is agree to act in this capacity. I further agree to complete performance of my duties, and I position as registered agent as provided for in Chapter Registered Agen	t service of process for the above stated limited liability hereby accept the appointment as registered agent and ly with the provisions of all statutes relating to the I am familiar with and accept the obligations of my

Page 1 of 2

"MGR" = Manager	Name and Address:	
"MGRM" = Managing Memb	ber	
MGRM	Robert D. Ryan	
	434 Nessler Way	
	Spring Hill, Florida 34609	
MGRM	Michael C. Ryan	
	434 Nessler Way	
	Spring Hill, FI 34609	
		7
,		
		——————————————————————————————————————
		S . S
(Use attachment if necessary)	1	32 RID
(obtation in indubbally)	,	12
	er than the date of filing:	
RTICLE V: Effective date, if oth	.or than the date of ming	<u>.</u> •
	(OPTIONAL)	
The effective date: 1) cannot be p	(OPTIONAL) orior to nor more than 90 days after the date t	
The effective date: 1) cannot be pute Florida Department of State;	(OPTIONAL) orior to nor more than 90 days after the date t AND 2) must be the same as the effective da	
The effective date: 1) cannot be posterior to the posterior of State; ertificate of Conversion, if an eff	(OPTIONAL) orior to nor more than 90 days after the date t AND 2) must be the same as the effective da	
The effective date: 1) cannot be pute Florida Department of State;	(OPTIONAL) orior to nor more than 90 days after the date t AND 2) must be the same as the effective da	
The effective date: 1) cannot be posterior to the posterior of State; ertificate of Conversion, if an eff	(OPTIONAL) orior to nor more than 90 days after the date t AND 2) must be the same as the effective da	
The effective date: 1) cannot be pose Florida Department of State; ertificate of Conversion, if an effective SIGNATURE:	(OPTIONAL) orior to nor more than 90 days after the date t AND 2) must be the same as the effective da fective date listed therein.)	
The effective date: 1) cannot be pose Florida Department of State; ertificate of Conversion, if an effective SIGNATURE:	(OPTIONAL) orior to nor more than 90 days after the date t AND 2) must be the same as the effective da fective date listed therein.)	
The effective date: 1) cannot be pose Florida Department of State; ertificate of Conversion, if an effective effective of Signature of a member (In accordance with section 608.40) the penalties of perjury that the fac	(OPTIONAL) orior to nor more than 90 days after the date t AND 2) must be the same as the effective da	nstitutes an affirmation under
The effective date: 1) cannot be pose Florida Department of State; ertificate of Conversion, if an effective effective of Signature of a member (In accordance with section 608.40) the penalties of perjury that the faction document to the Department of States	(OPTIONAL) orior to nor more than 90 days after the date to AND 2) must be the same as the effective date ective date listed therein.) or an authorized representative of a member. 8(3), Florida Statutes, the execution of this document counts stated herein are true. I am aware that any false inform	nstitutes an affirmation under