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(F	Requestor's Name)	
(/	Address)	
	Address)	
·	,	
	City/State/Zip/Phone #)	
(1	City/State/Elp/Filotic #)	
PICK-UP	☐ WAIT	MAIL
(1	Business Entity Name)	
	Document Number)	
Certified Copies	Certificates o	f Status
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Special Instructions to F	iling Officer:	
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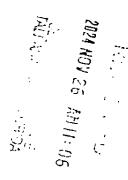
Office Use Only



700439210257

Conversion

PANOV 26 AND: 11



A. RAMSEY DEC 2 2024



Filing Cover Sheet

Sunbiz Prepaid Account # I20160000017				
To: Florida Division of Corporations				
From: LESLIE SELLERS C/O Capitol Services, Inc.				
Date: 11/26/2024				
Trans#: 1513693				
Entity Name: SATCOM DIRECT HOLDING C	OMPANY, LLC			
Articles of Organization ()	Amendment ()			
Articles of Dissolution ()	Annual Report ()			
Conversion (XXX)	Fictitious Name ()			
Foreign Qualification ()	Limited Liability ()			
Limited Partnership ()	Merger ()			
Reinstatement ()	Withdrawal / Cancellation ()			
Other ()	Partnership Registration ()			
STATE FEES PREPAID WITH <u>SUNBIZ ACCT #I20160000017</u> in the amount of \$55.00				
PLEASE RETURN:				
Certified Copy (XXX) Plain Stamped Copy ()				
Good Standing () Certificate of Fact	t ()			

Phone: 855-498-5500

COVER LETTER

Registration Section Division of Corporations				
Company, LLC				
lorida Limited Liability Company				
and fee(s) are submitted to convert a Florida Other Business Entity" in accordance with				
erning this matter to:				
s Team				
ode				
nnual report notification)				
is matter, please call:				
at (855) 498-5500				
Area Code and Daytime Telephone Number				
amount:				
Fee S55.00 Filing Fee S60.00 Filing Fee, and Certified Copy Certified Copy, and Certificate of Status				
Street Address:				
Registration Section				
Division of Corporations				
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
Tallahassee, FL 32303				

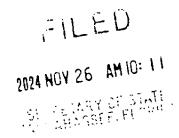
CR2E106 (05/17)

Articles of Conversion

For

Florida Limited Liability Company Into

"Converted or Other Business Entity"



The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:				
Satcom Direct Holding Company, LLC				
Enter Name of Florida Limited Liability Company				
2. The name of the "Converted or Other Business Entity" is:				
Satcom Direct Holding Company, LLC				
Enter Name of "Converted or Other Business Entity"				
3. The "Converted or Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)				
organized, formed or incorporated under the laws of				
(Enter state, or if a non-U.S. entity, the name of the country) The formation document is attached (if applicable).				
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.				
5. This conversion shall be effective in Florida on: (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 of the conversion under the laws governing the "Other Business Entity.") Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date				
will not be listed as the document's effective date on the Department of State's records.				

Page 1 of 2

- 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
 - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street	Address: 050 Satc	050 Satcom Lane		
	Melbour	ne, Florida 32940		
Mailin	g Address:	 		
app		siness Entity" has agreed to pay by which such members are entit		
Signed	1 thisd	ay ofay	, 20 <mark>24</mark>	
Signat	ure: /s/ Drew Haggard	The state of the s		
		t be signed by a Member or Authorized R		
Printed	Name: Drew Haggard	Title: Secretary		
Fees:	Filing Fee: Certified Copy: Certificate of Status:			

Page 2 of 2