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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

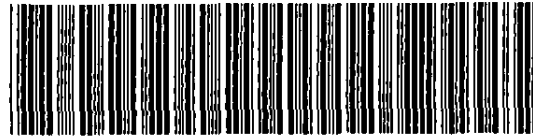
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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05/25/12--01001--010 \*\*185.00

RECEIVED  
FILED  
2012 MAY 24 PM 2:40  
12 MAY 24 AM 9:39  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

MAY 25 2012

T. HAMPTON

Sunstate Research

Requester's Name

Address

City/State/Zip

Phone #

656-5454

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. OT Training Solutions Inc.  
(Corporation Name) (Document #)
2. into  
(Corporation Name) (Document #)
3. OT Training Solutions LLC  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in ☐ Pick up time ☒ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

**CERTIFICATE OF CONVERSION**  
For  
**"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 Section 608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is OT TRAINING SOLUTIONS, INC., a Florida corporation.
2. The "Other Business Entity" is a corporation first organized, formed or incorporated under the laws of Florida on March 22, 2008.
3. The jurisdiction of the "Other Business Entity" has not changed since its formation.
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization is OT TRAINING SOLUTIONS, LLC.
5. This conversion shall be effective upon the date of filing this Certificate of Conversion and attached Articles of Organization with the Florida Department of State.
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, Florida Statutes, 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 21<sup>st</sup> day of May, 2012.

**OT TRAINING SOLUTIONS, LLC, a Florida limited liability company**

By: Marion A. Owens  
MARION OWENS  
Managing Member

By: Kristopher J. Thorpe  
KRISTOPHER THORPE  
Managing Member

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**OT TRAINING SOLUTIONS, INC., a Florida corporation**

By: Marion A. Owens  
MARION OWENS  
President/CEO

By: Kristopher J. Thorpe  
KRISTOPHER THORPE  
Vice President/CFO

**ARTICLES OF ORGANIZATION  
OF  
OT TRAINING SOLUTIONS, LLC**

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These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608).

ARTICLE I - NAME

The name of this Limited Liability Company is OT TRAINING SOLUTIONS, LLC.

ARTICLE II - MAILING ADDRESS

The mailing address and street address of the principal office of OT TRAINING SOLUTIONS, LLC, is 12633 Challenger Parkway, Suite 230, Orlando, Florida 32826.

ARTICLE III - DURATION

The period of duration for OT TRAINING SOLUTIONS, LLC shall be perpetual from the date of filing these Articles with the Department of the State, except for the limitations set out in Florida Statutes Section 608.441.

ARTICLE IV - REGISTERED AGENT & OFFICE

The name of the initial registered agent is TRAVIS A. PERRY. The street address of the initial registered agent is 595 North Nova Road, Suite 107, Ormond Beach, Florida 32174.

ARTICLE V - ADDITIONAL MEMBERS

Additional members to the Company may be admitted, but only if all the current members agree to the admission of the additional members and to the terms of admission.

ARTICLE VI - TERMINATION OF MEMBERSHIP

If a member of the Company dies, retires, resigns, is expelled, is dissolved, experiences bankruptcy, or upon the occurrence of any other event which terminates the continued membership of a member in OT TRAINING SOLUTIONS, LLC, the remaining members may, by unanimous agreement, continue the business of OT TRAINING SOLUTIONS, LLC.

## ARTICLE VII - MANAGEMENT

OT TRAINING SOLUTIONS, LLC is to be managed by managers and the name and address of the individuals who will serve as the managers are:

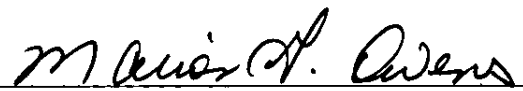
|                   |     |  |
|-------------------|-----|--|
| MARION OWENS      | MGR | 197 Steeplechase Circle<br>Sanford, Florida 32771  |
| KRISTOPHER THORPE | MGR | 1713 Cedar Stone Court<br>Lake Mary, Florida 32746 |

These initial managers shall serve until a successor manager(s) is qualified and elected as prescribed by and provided in the regulations of the Company. The managers shall also hold the offices and have the responsibilities accorded to him/her by the members set out in the regulations of the Company.

## ARTICLE VIII - REGULATIONS

The members shall have the power to adopt, alter, amend, or repeal regulations of OT TRAINING SOLUTIONS, LLC.

The undersigned executed these Articles of Organization on May 21, 2012.

  
MARION OWENS

  
KRISTOPHER THORPE

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE  
FOR  
OT TRAINING SOLUTIONS, LLC**

PURSUANT TO THE PROVISIONS OF FLORIDA STATUTES SECTION 608.415,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN  
THE STATE OF FLORIDA.

1. The name of the limited liability company is OT TRAINING SOLUTIONS, LLC.
2. The name and address of the registered agent and office is as follows:

TRAVIS A. PERRY  
595 North Nova Road, Suite 107  
Ormond Beach, Florida 32174

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.

  
\_\_\_\_\_  
TRAVIS A. PERRY

5/21/12  
DATE

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