#L/2000/60675

| (Re | questor's Name) | |
|---|-------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Document Number) | | |
| Certified Copies | Certificate | s of Status |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | | |

Office Use Only



900242685199

12/27/12--01001--020 **450.00

ROUNTERED OF FILING ACKNOWLEDGE TO ACKNOWLEDGE OF FILING RECEIVED ASSISTANCE OF STATE

CRETAR; BF SI

K.SALY EXAMINER DEC 27 2012

| FLORIDA RESEARCH & FI 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)364-8000 | | |
|--|---------------------------|-----------------|
| WALK-IN | | OFFICE USE ONLY |
| ENTITY NAME: | | |
| GEO OPERAT | TIONS, LLC | |
| CK# 5946 FOR \$ 450 | 0.00 (150.00 for this fil | ing) |
| PLEASE FILE THE ATTACHED CONVERSION & RETURN THE FOLLOWING: | | |
| CERTIFIED COPY | | |

XXX STAMPED COPY

___ CERTIFICATE OF STATUS

Examiner's Initials

FILED

12 DEC 26 PM 12: 05

Certificate of Conversion For "Other Business Entity" Into

SENTITY"

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

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 s.608.439, Florida Statutes.

| 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: GEO Operations, Inc. | | | |
|--|--|--|--|
| (Enter Name of Other Business Entity) | | | |
| 2. The "Other Business Entity" is a <u>COrporation</u> . | | | |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) | | | |
| first organized, formed or incorporated under the laws of <u>Florida</u> (Enter state, or if a non-U.S. entity, the name of the country) | | | |
| on 10-23-2012 | | | |
| on 10-23-2012— (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: | | | |
| GEO Operations, 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 20 day of December | 20_12 | |
|---|---|--|
| Signature of Member or Authorized Rep. Individual signing affirms that the facts sta constitutes a third degree felony as provide | resontative of Limited Liability Company; ated in this document are true, Any false information and for in s.817.155, F.S. | |
| Signature of Member or Authorized Represe Printed Name: John Bulfin | entative: Title: Secretary | |
| this document are true. Any false informatically 155, RS, ISee below for required sign | ntity: Individual(s) signing affirm(s) that the facts stated in ion constitutes a third degree felony as provided for in ature(s).] | |
| Signature: August Printed Name: John Buillin | Title: Secretary | |
| Signature: | | |
| Printed Name: | Title: | |
| Signature:Printed Name: | Title: | |
| Signature: | | |
| | Title: | |
| Signaturo: Printed Name: | Title; | |
| Signature:Printed Name: | Title: | |
| If Florida Cornoration: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected | tor, or Officer. I, an incorporator must sign. | |
| If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. | | |
| If Florida Limited Partnership or Limited Signatures of ALL General Partners, | Liability Limited Partnership; | |
| <u>All others:</u> Signature of an authorized person. | | |
| Fees: | | |
| Certificate of Conversion: Pees for Plorida 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

| ARTICLE I - Name: The name of the Limited Liability Company is: | | |
|---|---|--|
| GEO Operations, LLC (Must end with the words "Limited Liability Company, the abbreviation "L.L.C.," or the designation "LLC.") | | |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: | | |
| Principal Office Address: | Mailing Address: | |
| 621 N.W. 53rd Street, Suite 700 Boca Raten, FL 33487 | 621 N.W. 53rd Street, Suite 700 Boca Raton, FL 33487 | |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) | | |

Corporate Creations Network Inc.

11380 Prosperity Farms Road, #221 E Florida street address (P.O. Box NOT acceptable)

Palm Beach Gardens, FL 33410

The name and the Florida street address of the registered agent are:

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)

Valerie Hawk-Donohue, Special Secretary (CONTINUED)

Page 1 of 2

The name and address of each Manager or Managing Momber is as follows: Title Name and Addressi "MGR" = Manager "MORM" - Managing Member George C. Zolay - MGR 621 N.W. 63rd Street, Suite 700 Boca Raton, FL 33487 Brian R. Evans - MGR 621 N.W. 63rd Street, Suite 700 Boca Raton, Ft. 33487 John J. Bulfin - MGR 621 N.W. 53rd Street. Suite 700 Boca Raton, FL 33487 (Use attachment If necessary) ARTICLE V: Bifective date, if other than the date of filing: _ (OPTIONAL) (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 Certificate of Conversion, if an effective date listed therein.) **REQUIRED SIGNATURE:** Signature of a momber or an authorized representative of a member. (In accordance with section 608.408(3), Plofida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, P.S.) John Bulfin Typed or printed name of signee

ARTICLE IV- Manager(s) or Managing Member(s):

Page 2 of 2