(Requesto	r's Name)		
(Address)			
(Address)			
(City/State	/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Business	Entity Name)		
(Documen	t Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

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COVER LETTER

TO: Registration Division of 0	Section Corporations		
SUBJECT:	RECYC	ILEONE, LLC	
	Name of Florida	a Limited Liability Compan	У
		ee(s) are submitted to der Business Entity" in a	
Please return all cor	respondence concernir	ng this matter to:	
MATTHEW P. BREUI	ER, ESQ.		
	Contact Person		
HOWARD & HOWAR	RD ATTORNEYS PLLC		
	Firm/Company		
450 WEST FOURTH S	STREET		
	Address	· - · · · · · · · · · · · · · · · · · ·	
ROYAL OAK, MI 480	067 		
	City, State and Zip Code		
mpb@h2law.com			
b-mail address: (to	be used for future annual	report notification)	
For further informat	ion concerning this ma	atter, please call:	
MATTHEW P. BREUER		at (_248)	-0520
Name of Contact I	Person	Area Code and Day	rtime Telephone Number
Enclosed is a check	for the following amo	unt:	
- \$25.00 Filing Fee	\$30.00 Filing Fee and Certificate of Status	\$55.00 Filing Fee and Certified Copy	S60.00 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRES	SS:	MAILING A	ADDRESS:
Registration Section		Registration Section	
Division of Corpora	tions	Division of Corporations	
Clifton Building 2661 Executive Center Circle		P. O. Box 6327 Tallahassee, FL, 32314	
Tallahassee, FL 321		ramanassee,	FL 34314

CR2E106 (07/14)

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:
RECYCLEONE, LLC
Enter Name of Florida Limited Liability Company
2. The name of the "Converted or Other Business Entity" is:
MANAGEMENTONE INVESTMENTS, LLC
Enter Name of "Converted or Other Business Entity"
3. The "Converted or Other Business Entity" is a LIMITED LIABILITY COMPAN (Enter entity type Example: corporation limited partnership sole proprietorship.
(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 MICHIGAN
(Enter state, or if a non-U.S. entity, the name of the country) On November 8, 2018
(Date of organization, formation or incorporation)
and 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.

Departm	the following s ent of State ma 7 and Chapter 4	treet and mailing address of an office the Florida y send and process served on the department pursuant to 8.		
Street Address:	2646 Perr	2646 Perry Lake Road		
	Ortonville	Ortonville, Michigan 48462		
Mailing Address	2646 Perr	2646 Perry Lake Road		
	Ortonville	Ortonville, Michigan 48462		
appraisal righ	ts the amount t -605.1072, F.S	siness Entity" has agreed to pay any members having o which such members are entitled under ss. 605.1006. ay of		
Signed this		ay of November, 20,10		
Signature:	140	c signed by a Member or Authorized Representative		
,	Michael Sliger	•		
Printed Name: _		Title:Title:		
Fees: Filing Fee Certified		\$25.00 \$30.00 (Optional)		

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":

Page 2 of 2

\$5.00 (Optional)

Certificate of Status:

CSCL/CD-700 (Rev. 08/15) MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU Date Recount 2 2 2018 (FOR BUREAU USE ONLY) FILED This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document. NOV 08 2018 Name MATTHEW P. BREUER, ESQ., HOWARD & HOWARD ATTORNEYS PLI **ADMINISTRATOR** CORPORATIONS DIVISION 450 WEST FOURTH STREET State ZIP Code **ROYAL OAK** MI 48067 **EFFECTIVE DATE:** Document will be returned to the name and address you enter above. If left blank, document will be returned to the registered office. **ARTICLES OF ORGANIZATION** For use by Domestic Limited Liability Companies (Please read information and instructions on reverse side) Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned executes the following Articles: ARTICLE I The name of the limited liability company is: MANAGEMENTONE INVESTMENTS, LLC ARTICLE II The purpose or purposes for which the limited liability company is formed is to engage in any activity within the purposes for which a limited liability company may be formed under the Limited Liability Company Act of Michigan. **ARTICLE III** The duration of the limited liability company if other than perpetual is: **ARTICLE IV** 1. The name of the resident agent at the registered office is: MICHAEL SLIGER 2. The street address of the location of the registered office is: 2646 PERRY LAKE RD ORTONVILLE 48462 . Michigan . (Street Address) (City) The mailing address of the registered office if different than above: , Michigan (P.O. Box or Street Address) (City) (Zlp Code) ARTICLE V (Insert any desired additional provision authorized by the Act; attach additional pages if needed.) Signed this October 2018 day of .