13000070364

(Requestor's Name)			
(Address)			
(Address)			
(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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Office Use Only



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FILED SECRETARY OF STATE



CT Corporation

515 East Park Avenue 3*
 Tallahassee, FL 32301

850 222 1092 tel 850 222 7615 fax

🧩 www.ctcorporation.com

-

May 13, 2013

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re: Order #: 8767638 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

CPI VSC Fort Myers LLC (DE) Misc - Foreign LLC Filing - Conversion/Organization Florida

CPI VSC Fort Myers LLC (DE) Obtain Document - Misc - Conversion/Organization Florida

CPI VSC Fort Myers LLC (DE) Certificate of Status-Domestic Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.



CT Corporation

515 East Park Avenue Tallahassee, FL 32301

850 222 1092 tel 850 222 7615 fax www.ctcorporation.com

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CPI VSC FORT MYERS LLC		
(Name o	of Resulting Florida Limi	ited Company)
	Limited Liability Cor	tion, and fees are submitted to convert an mpany" in accordance with s. 608.439, F.S.
LYNNETTE RICH		
(Contact Person)		
POLEY & RICH, L.L.C.		
(Firm/Company)		
235 Moore Street		
(Address)		
Hackensack, NJ 07601		
(City, State and Zip Code	e)	
Irrich!@verizon.net E-mail address: (to be used for future annual repo	ort notifications)	
For further information concerning this r	·	
Lynnette Rich	at (_201)	487-1900
(Name of Contact Person)	(Area Code a	nd Daytime Telephone Number)
Enclosed is a check for the following am	ount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$ \$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fee and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Registra Division P. O. Bo	NG ADDRESS: tion Section of Corporations ox 6327 see, FL 32314

FILED
2013 HAY 13 AN 9-47
SECRETARY OF STATE

Certificate of Conversion For "Other Business Entity" Into

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:
Conversion is: CPI VSC FORT MYERS LLC M 13 - 1655
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company
(Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of the State of Delaware
(Enter state, or if a non-U.S. entity, the name of the country)
On December 12, 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:
CPI VSC FORT MYERS 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; <u>AND</u> 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.

Page 1 of 2

Signed this 13 day of May	20/3			
Individual signing affirms that the facts sta constitutes a third degree felony as provide				
Signature of Member or Authorized Represe Printed Name: Lynnette Rich	entative: Title: Authorized Representative			
this document are true. Any false informati	ntity: Individual(s) signing affirm(s) that the facts stated in ion constitutes a third degree felony as provided for in ature(s).]			
Signature: Printed Name: Lynnette Rich	Title: Authorized Representative			
Signature:	•			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature: Printed Name:	Title:			
Signature:Printed Name:	Title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.				
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.				
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.				
All others: Signature of an authorized person.				
Fees:				
Certificate of Conversion: Fees for Florida 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	l Liability Comp	any is:
CPI VSC FORT MYERS LI		
(Must end with the words "Limi	ted Liability Company	the abbreviation "L.L.C.," or the designation "LLC.")
ARTICLE II - Address The mailing address and		f the principal office of the Limited Liability Company is:
Principal Office Address:		Mailing Address:
235 Moore Street, Hackensack NJ 07601		235 Moore Street, Hackensuck NJ 07601
(The Limited Liability Company business entity with an active I	y cannot serve as its ov Torida registration.)	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another of the registered agent are:
	NRAI Services, Ir	зс.
		Name
1200 South Pine Island Road		
	Florida street	nddress (P.O. Box <u>NOT</u> acceptable)
<u>P</u>	Inntation	FL 33324
_		City, State, and Zip
Uming hoon named on w	naintavad agast a	ud to accent service of process for the above stated limited lie

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)

Denise Bell, Asst. Secy.

(CONTLNUED)

Page 1 of 2

Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR SPC ASSOCIATES, L.L.C. 235 Moore Street, Hackensack NJ 07601 (Use attachment if necessary) ARTICLE V: Effective 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 SIGNATURES Signature of a member or an authorized representative of a member. (In accordance with Lection 608.408(3), Florida 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 \$.817.155, F.S.) LYNNETTE RICH Typed or printed name of signee

Page 2 of 2

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

The name and address of each Manager or Managing Member is as follows: