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(Requestor's Name)
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(City/State/Zip/Phone #)
,
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COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32301

TO:

SUBJECT: TRUCKTRONICS INC		
	llting Florida Lin	nited Company)
The enclosed Certificate of Conversion, Articl "Other Business Entity" into a "Florida Limite		
Please return all correspondence concerning the	nis matter to:	
TESSA HARRIS / ANTHONY BERN	IARD	
(Contact Person)		
A BERNARD FINANCIAL SERVICE	S	
(Firm/Company)		
9032 SW 152ND STREET		3 SEP 13
(Address)		<u></u>
MIAMI, FL. 33157		
(City, State and Zip Code)		≅
ABERNARDFINANCIAL@GMAIL.C	OM	က
E-mail address: (to be used for future annual report not		<u>5</u> .
For further information concerning this matter	, please call:	
TESSA HARRIS/ ANTHONY BERNARD	t (305	₎ 251-4591
(Name of Contact Person)		and Daytime Telephone Number)
Enclosed is a check for the following amount:		
	180.00 Filing Fe nd Certified Cop	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	Registra Divisio P. O. B	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314

Certificate of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> 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:		
TRUCKTRONICS INC		
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a CORPORATION.		
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	13 SEP 13	FALL AHASSEE . F LUNION
first organized, formed or incorporated under the laws of FLORIDA	_	P
(Enter state, or if a non-U.S. entity, the name of the country)	3 PM	SEE.
on 09/21/2004	(D	1
(Enter date "Other Business Entity" was first organized, formed or incorporated)	2: 5 <u>1</u>	2
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the la which it is now organized, formed or incorporated:		3
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:		
TRUCKTRONICS 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 filed by the Florida Department of State; AND 2) must be the same as the effective date lister attached Articles of Organization, if an effective date is listed therein.)		le
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 corresponding to the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion con		n.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction under wh	ich it i	s

currently organized, formed or incorporated.

Signed this 3 day	of <u>SEPTEMBER</u>	_ 20 <u>13</u> .
Individual signing affirms constitutes a third degree f	that the facts stated in t elony as provided for in	
Signature of Member or Au Printed Name: <u>RAFAEL NA</u>	thorized Representative	Title: MGRM
this document are true. An s.817.155, F.S. [See below f	y false information con or required signature(s	
Signature: Kafael	1 Javarys	Title: MEKM
Printed Name: RAFAEL NAVA	KH(1	_ me
Signature:		Title:
Printed Name:		Title:
Signature:		
Printed Name:		_ Title:
Signature:Printed Name:		_ Title:
Signature:		 ئ
Printed Name:		
Ciamatuma		
Printed Name:		
If Florida Corporation: Signature of Chairman, Vice If Directors or Officers have	Chairman, Director, or on the one selected, an Inc.	Officer. corporator must sign.
If Florida General Partner Signature of one General Par		
If Florida Limited Partners Signatures of <u>ALL</u> General 1		y Limited Partnership:
All others: Signature of an authorized pe	erson.	
Fees:		
Certificate of Conversion: Fees for Florida Articles of Certified Copy: Certificate of Status:	\$30.00 \$5.00	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
TRUCKTRONICS LLC (Must end with the words "Limited Liability Company, the abbrev	viation "L.L.C.," or the designation "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2371 NW 149TH STREET OPA LOCKA, FL 33054	2371 NW 149TH STREET OPA LOCKA, FL. 33054 TARE ARE ARE ARE ARE TO ARE
ARTICLE III - Registered Agent, Registered C (The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)	Office, & Registered Agent's Signature:
The name and the Florida street address of the reg	gistered agent are:
RAFAEL NAVARR	Name
2371 NW 149TH S Florida street address (I	STREET P.O. Box <u>NOT</u> acceptable)

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..

OPA LOCKA

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Me	RAFAEL NAVARRO 2371 NW 149TH STREET OPA LOCKA, FL. 33054 75. 51
	PM 5: 51
(Use attachment if necessa	ry)
effective date: 1) cannot be lorida Department of Stat	OPTIONAL) e prior to nor more than 90 days after the date this document is filed by e; AND 2) must be the same as the effective date listed in the attached effective date listed therein.)
Rafae	Q Mavoure oer or an authorized representative of a member.
(In accordance with section 608 the penalties of perjury that the	V 408(3), Florida Statutes, the execution of this document constitutes an affirmation under facts stated herein are true. I am aware that any false information submitted in a State constitutes a third degree felony as provided for in s.817.155, F.S.)
RAFAEL NAV	ARRO