L14000064279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL
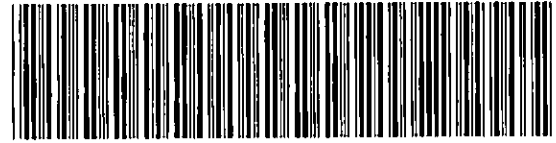
(Business Entity Name)

(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

02/09/23--01019--022   **30.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Unmanned Vehicle Technologies, LLC
_____
Name of Florida Limited Liability Company

The enclosed Articles of Conversion and fee(s) are submitted to convert a Florida Limited Liability Company" into an "Other Business Entity" in accordance with s.605.1045, F.S.

Please return all correspondence concerning this matter to:

Robert Ost
_____
Contact Person

Harrington Miller PA
_____
Firm/Company

4710 S. Thompson, Suite 102
_____
Address

Springdale, Arkansas 72764
_____
City, State and Zip Code

rost@arkansaslaw.com
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Ost   at (479) 751-6464
_____
Name of Contact Person   Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $25.00 Filing Fee   ■ $30.00 Filing Fee   ☐$55.00 Filing Fee   ☐ $60.00 Filing Fee,
                       and Certificate of   and Certified Copy   Certified Copy, and
                       Status   Certificate of Status

Mailing Address: **Street Address:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   The Centre of Tallahassee
Tallahassee, FL 32314   2415 N. Monroe Street, Suite 810
                                        Tallahassee, FL 32303

CR2E106 (05/17)

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:

Unmanned Vehicle Technologies. LLC   *L/4 (·(\(,() (/'4.) 7(*

_____.
Enter Name of Florida Limited Liability Company

2. The name of the "Converted or Other Business Entity" is:

Unmanned Vehicle Technologies, LLC

_____.
Enter Name of "Converted or Other Business Entity"

3. The "Converted or Other Business Entity" is a ___limited liability company_____
(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___Arkansas_____.
(Enter state, or if a non-U.S. entity, the name of the country)
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: ___January 23, 2023_____.
(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 of the conversion under the laws governing the "Other Business Entity.")

<u>Note:</u> 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.

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":

a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address:

4710 S. Thompson. Suite 102

Springdale, Arkansas 72764

Mailing Address:

4710 S. Thompson. Suite 102

Springdale, Arkansas 72764

7. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this _23rd_ day of _January_, 20 _23_

Signature: _____
Must be signed by a Member or Authorized Representative

Printed Name: _Robert Ost_ Title: _Authorized Representative_

Fees: Filing Fee: $25.00
Certified Copy: $30.00 (Optional)
Certificate of Status: $5.00 (Optional)