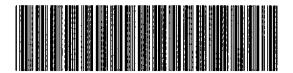
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(Re	equestor's Name)	
(Address)		
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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2814 JUL 21 P 5: 37
SECRETARY OF STATE

BOSTICK
JUL 21 2014
EXAMINER

COVER LETTER

TO:	Registration S Division of C							
SUB.	JECT: BPO A	utomation Group LL	С					
		(Name	of Resulting Florida	Limite	ed Company)	· —		
		s of Conversion, Artic o a "Florida Limited Li	_					'Othe
Pleas	e return all corr	espondence concernin	g this matter to:					
Nico	le Ocean							
	٠.	(Contact Person)						
BPC	Automation C	Froup LLC						
		(Firm/Company)						
8 Ste	ewart Lake Co	ve #293						
		(Address)	· · · · · · · · · · · · · · · · · · ·					
Mira	mar Beach, Fl	_ 32550						
		City, State and Zip Code)						
nicol	le@bpo-auton	nation.com						
E-	mail Address: (to b	be used for future annual re	port notifications)					
For fi	urther informati	on concerning this ma	tter, please call:					
Nico	le Ocean		at (360	223	-2482 ext. 5			
	(Name of Conta	act Person)		(Day	ytime Telephone Number))		
Enclo	osed is a check t	for the following amou	ınt:					
(\$25 f	50.00 Filing Fees or Conversion 5 for Articles ganization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Copy		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status	SECRETAR TALLAHASS	2014 JUL 2	T
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		Registra Division P. O. Bo	ation n of C ox 63	Corporations	RY OF STATE SEE, FLORIBA	P 5: 37	i C	

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: BPO Automation Group LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Washington state
(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BPO Automation Group LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: 1) cannot be prior to date of receipt or filed date 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.)
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Page 1 of 2

FILED 2014 JUL 21 P S: 37 SECRETARY OF STATE

· ·	•	ı	
Signed this 18th day	of June	_ 20 <u>14 </u>	
Signature of Authorized F	Representative of Limit	ted Liability Company:	
	. 80	1.4.10	
Signature of Authorized Re Printed Name: Nicole Ocea	presentative:/_	Til Foundar/COO	
Printed Name: NICOle Ocea	<u>IN</u>	_ little: Founder/COO	
Signature(s) on behalf of O	ther Business Entity: [See below for required signature(s).]
Signature: Missle Osse		Title Foundar/COO	
Printed Name: NICOIE OCEA	<u> </u>	Title: Founder/COO	
Signature:			
Printed Name:		_ Title:	,,,,,,
Signature:	 	Title:	
Printed Name:		Title:	
Signature:			
Printed Name:		_ Title:	<u>_</u>
Signature:		_ Title:	
rimeu Name.			
Signature:			
Printed Name:		_ Title:	
If Florida Corporation:			
Signature of Chairman, Vice	Chairman, Director, or (Officer.	
If Directors or Officers have			
		•	
If Florida General Partner		ty Partnership:	
Signature of one General Par	aner.		
If Florida Limited Partner	ship or Limited Liabilit	y Limited Partnership:	
Signatures of ALL General			
A 12			
All others: Signature of an authorized p	ercon		= =
Signature of all audiorized p	orson.		SEC SEC
Fees:			유유 들
			2814 JUL 21 SECRETARY
Articles of Convers		\$25.00	en –
	icles of Organization:	\$125.00	<u>न</u> न บ
Certified Copy:		\$30.00 (Optional)	75 418 5:
Certificate of Status	i.	\$5.00 (Optional)	<u> </u>

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	s:	
BPO Automation Group, LLC (Must end with the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limite	ed Liability Company is:
Principal Office Address: Mailing Address:		
8 Stewart Lake Cove #293 Miramar Beach, FL 32550 8 Stewart Lake Cove #293 Miramar Beach, FL 32550 Miramar Beach, FL 32550		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.)	red Office, & Registered Aggistered Agent. You must designate an	ent's Signature: individual or another
The name and the Florida street address of the	e registered agent are:	
Nicole Ocean		TALL TALL
Nat	me	TIL 2 SECRETAR SALLAHASS
8 Stewart Lake Cove #		JUL 21 F
Florida street address (P. Miramar Beach	O. Box <u>NOT</u> acceptable) FL 32550	P 5: Of STA

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 605, F.S.

Zip

Registered Agent's Signature (REQUIRED)

City

(CONTINUED)

ARTICLE IV- The name and address of each person au Company:	thorized to manage and control the Limited Liability
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Nicole Ocean 8 Stewart Lake Cove #293
	Miramar Beach, FL 32550
	SECRE AH
	SEEF. P
(Use attachment if necessary)	STATI LORII
ARTICLE V: Effective date, if other than the dat If an effective date is listed, the date must be so or 90 days after the date of filing.)	te of filing: (OPTIONAL) specific and cannot be more than five business days prior
ARTICLE VI: Other provisions, if any.	
DEOUGOED CICALAGUDE.	
REQUIRED SIGNATURE:	
Signature of a member or (In accordance with section 605.0203 (1) (be constitutes an affirmation under the penaltic	o), Florida Statutes, the execution of this document as of perjury that the facts stated herein are true.
Nicole Ocean	or printed name of signee
Filing Fees:	or hymner manne or preme

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 25, 2014

NICOLE OCEAN 8 STEWART LAKE COVE #293 MIRAMAR BEACH, FL 32550

SUBJECT: BPO AUTOMATION GROUP, LLC

Ref. Number: W14000039710

We have received your document for BPO AUTOMATION GROUP, LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 314A00013857

ZHIN JUL 21 P 5: 3.7 SECRETARY OF STATE

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