# L14060162912

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	·····
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of St	atus
Special Instructions to Filing Officer:	
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Office Use Önly	



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## COVER LETTER

TO:	Registration S Division of C				
SUBJ	ECT: BLUET	EK SOLUTIONS, LL	_C		
- •		(Name	of Resulting Florida	Limited	(Company)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this matter to:		
Umes	sh Krishnaswa	amy			
	<del></del>	(Contact Person)	<u> </u>		
BLUE	TEK SOLUTI	ONS, LLC			
		(Firm/Company)			
6131	Hedgesparro	ws Lane			
		(Address)			
Sanfo	ord FL 32771				
	(0	City, State and Zip Code)			
umes	h.kswamy@g	mail.com			
E-m	nail Address: (to b	e used for future annual re	port notifications)		
For fu	rther information	on concerning this man	tter, please call:		
Umes	sh Krishnaswa	amy	_at ( <u>407</u> )	310	2463
	(Name of Conta	ct Person)	(Area Code)	(Dayı	time Telephone Number)
Enclos	sed is a check for	or the following amou	nt:		
(\$25 for & \$125	0.00 Filing Fees r Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status	□\$180,00 Fiting F and Certified Copy		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Regist Division Clifton 2661 I	ET ADDRESS ration Section on of Corporation Building Executive Center assee, FL 3230	ons er Circle	Registra Division P. O. Bo	tion S of Co x 632	orporations

### **Articles of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

Statutos,		
1. The name of the "Other Busine BLUETEK SOLUTIONS	ess Entity" immediately prior to the filing of the Article	es of Conversion is:
	nter Name of Other Business Entity)	
2. The "Other Business Entity" is	GENERAL PARTNERSHIP	
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorpo	orated under the laws of FLORIDA STATE	
SEPTEMBER 26 2011	(Enter state, or if a non-U.S. entity, the	name of the country)
(date of organization, formation or in	ncorporation)	
3. The name of the Florida Limite	ed Liability Company as set forth in the attached Artic	cles of Organization:
BLUETEK SOLUTIONS, LLC		
(Enter Nam	e of Florida Limited Liability Company)	,
4. If not effective on the date of f	iling, enter the effective date:	
(The effective date: 1) cannot be date this document is filed by the	e prior to date of receipt or filed date nor more than e Florida Department of State; <u>AND</u> 2) must be the les of Organization, if an effective date is listed there	same as the effective
5. The plan of conversion has been	n approved in accordance with all applicable statutes.	
	Page 1 of 2	14 OCT 16 AM 10 SEEREDARY DES
		6

Signed this 09 day of October	20 <u>_14</u> .	
Signature of Authorized Representative of Lim		
Signature of Authorized Representative:	Imed Knichnamoury	
Printed Name: Umesh Krishnaswamy	Title: Manager	_
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).	I
Signature: Printed Name: Praveen Setty	Title: Manager	
Fillited Name: Flaveel Setty	Title, Warrager	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	<u> </u>
Signature:Printed Name:	Title	
Fillited Name.	Title	<del>_</del>
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	<del></del>
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:	SEC TALL
All others: Signature of an authorized person.		14 OCT 16 ECRETARY
Fees:		AM 10: 34 YOF STATE FE FLORIO
Articles of Conversion:	\$25.00	NG VIS VIS
Fees for Florida Articles of Organization:	\$125.00	<u>2</u>
Certified Copy:	\$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Con	npany is:	
BLUETEK SOLUTIONS, LLC (Must end with the words "Lir	mited Liability Company, "L.L.C.," or "LLC."	<u>')                                    </u>
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limi	ted Liability Company is:
Principal Office Address:	Mailing Address:	
6131 Hedgesparrows Lane Sanford FL 32771	6131 Hedgesparrows Sanford FL 32771	s Lane
ARTICLE III - Registered Agent, Ro (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street addres	s own Registered Agent. You must designate a )	in individual or another
Praveen Setty	Name	V 100 %
1697 Cherry Ridg Florida street addi	ge Drive ress (P.O. Box <u>NOT</u> acceptable)	FORETARY L
Lake Mary	FL <b>32746</b>	AH 10: 34 OF STATE
City		34 PAIC
registered agent and agree to act in the statutes relating to the proper and c	ignated in this certificate, I hereby a his capacity.  I further agree to com	accept the appointment as ply with the provisions of all and I am familiar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

TP241	
<u>Title:</u> "AMBR" = Authorized N	Name and Address: Member
"MGR" = Manager MGR	Umesh Krishnaswamy
WIGK	6131 Hedgesparrows Lane
	Sanford FL 32771
1400	
MGR	Praveen Setty
	1697 Cherry Ridge Drive  Lake Mary, FL 32746
	Lake Mary, FL 32740
(Use attachment if necess	sary)
	ther than the date of filing:
to or 90 days after the date of fil	date must be specific and cannot be more than five business days prioring.)
ARTICLE VI: Other provisions,	date must be specific and cannot be more than five business days prioring.)
to or 90 days after the date of file ARTICLE VI: Other provisions,	ing.)  if any.
to or 90 days after the date of file ARTICLE VI: Other provisions,	ing.)  if any.
to or 90 days after the date of file ARTICLE VI: Other provisions, None  REQUIRED SIGNATU	ing.)  if any.  RE:  Mohrobaut  M
ARTICLE VI: Other provisions, None  REQUIRED SIGNATU  Signature of the date of file of the provisions, None	ing.)  if any.
ARTICLE VI: Other provisions, None  REQUIRED SIGNATU  Signature of the constitutes an affirmation under the constitutes at third degree fele	RE:  Of a member or an authorized representative of a member.  605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true.  Formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.)
ARTICLE VI: Other provisions, None  REQUIRED SIGNATU  Signature of the constitutes an affirmation under the constitutes at third degree fellows.	date must be specific and cannot be more than five business days prioring.)  if any.  RE:  Of a member or an authorized representative of a member.  605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true.  ormation submitted in a document to the Department of State

Page 2 of 2

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-