L15000035653

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	_	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number	}
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600268252936

01/22/15--01005--015 **150.00

Effective Date 3/2/15

NOT DELACED

DEFARIMENTOR STORENS OF STORENS O

SECRETARY OF STATE

FEB 2 6 2015 J. HARRIS

O N

0 N L

Moneque S. Walker

Reguestor's Neppe 3301 Ponce De Leon Blvd

Address
Miami Fl 33134

City State ZIP Phone

CORPORATION(S) NAME

T	actical	Ballistic G	aroup Inc
<u></u>		<u> </u>	1.70
		· · · · · · · · · · · · · · · · · · ·	
-			
() Profit		·) Amendment	/) \$80,000
() NonProfit	() Amenament	() Merger
() Foreign	() Dissolution	() Mark
() Limited Partnership) Annual Report	Comor CONVOSION
() Reinstatement	ì) Reservation	() Change of Registered Agent
() Combined Conv) Bhasa Casina	() Certificate Under Seal
() Certified Copy) Photo Copies	() Certificate Under Seal
() Call When Ready	() Call If Problem	() After 4:30
Walk In	() Will Walt	(70)	Pick Up () Mail Out
Neme			
Availability			
Document			

Verifier

Acknowledgment

W.P. Verifier

Examiner

Updater

CR2E031 (R8-85)

Examplife Toll Free: 1-800-432-3028

COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: TACTICAL BALLISTIC GROUP INC. (Name of Resulting Florida Limited Company) The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. Please return all correspondence concerning this matter to: MONEQUE S WALKER ESQ. (Contact Person) LAW OFFICES OF MONEQUE S WALKER PA (Firm/Company) 3301 PONCE DE LEON BLVD. 3 FLOOR (Address) CORAL GABLES, FL 33134 (City, State and Zip Code) LAWYERS@IMMIGRATIONYES.COM E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: VALERIA KASSANDRAS (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: **\$150.00** Filing Fees □\$155.00 Filing Fees □\$180.00 Filing Fees □\$185.00 Filing Fees, (\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and & \$125 for Articles Status Certificate of Status of Organization) **STREET ADDRESS: MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301



February 11, 2015

EMPIRE MONEQUE S WALKER

SUBJECT: TACTICAL BALLISTIC GROUP, LLC

Ref. Number: W15000004831

We have received your document for TACTICAL BALLISTIC GROUP, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 015A00002836

2015 FEB 25 PH 1: 09

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 Article	s of Conve	ersion is	s:
TACTICAL BALLISTIC GROUP INC. P1400013212. (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.)			
First organized, formed or incorporated under the laws of FLORIDA			
02/11/2014 (Enter state, or if a non-U.S. entity, the i	name of the c	ountry)	
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	les of Org	anizati	ion:
TACTICAL BALLISTIC GROUP, LLC			
(Enter Name of Florida Limited Liability Company)			
4. If not effective on the date of filing, enter the effective date: 3/2/2015 (The effective date: 1) cannot be prior to date of receipt or filed date nor more than date this document is filed by the Florida Department of State; AND 2) must be the date listed in the attached Articles of Organization, if an effective date is listed there	same as tl		
5. The plan of conversion has been approved in accordance with all applicable statutes.			
Page 1 of 2	TALL.	2015 F	2-recorded

2015 FEB 25 PM 1: 0

•			
Signed this 12 day of DECEMBER	20 <u>14</u>		
Signature of Authorized Representative of Lim			
Signature of Authorized Representative: YARD / Printed Name: RAFAEL D. MOROS GAMEZ	lafari		
Printed Name: RAFAEL D. MOROS GAMEZ	Title: PRESIDENT		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]		
Signature: Name: Printed Name:			
Printed Name:	Title:	•	
Signature:			
Printed Name:	Title:		
Signature:			
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Printed Name:	Title:		
Signature:Printed Name:	Tital		
Printed Name:	I itle:		
Signature:Printed Name:	Title		
	1 ide		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer		
If Directors or Officers have not been selected, an In			
If Florida General Partnership or Limited Liabili	ty Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:		
Signatures of <u>ALL</u> General Partners.			
All others:		2015 FEB	_
Signature of an authorized person.		CRE FEB	""
Fees:		7AR ASS	1
Articles of Conversion:	\$25.00	PH Y OF	
Fees for Florida Articles of Organization:	\$125.00	FLO.	-
Certified Copy:	\$30.00 (Optional)	: 09	
Certificate of Status:	\$5.00 (Optional)	⊙r 9	

Effective Date 3/2/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
TACTICAL BALLISTIC GROUP, LLC (Must end with the words "Limited Liability	y Company, "L.I.,C.," or "LI.C.")			
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited	Liability Con	npany i	s:
Principal Office Address:	Mailing Address:			
300 NE 62 STREET MIAMI, FL 33138	300 NE 62 STREET MIAMI, FL 33138			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an in			
RAFAEL D. MOROS GAM	1EZ			
Name				
300 NE 62 STREET	Pay NOT acceptable)			
Florida street address (P.O.	Box (NO) acceptable)			
MIAMI	FL 33138			
City	Zip			
Having been named as registered agent and to liability company at the place designated in a registered agent and agree to act in this capacit statutes relating to the proper and complete po accept the obligations of my position as regi	this certificate, I hereby acce y. I further agree to comply erformance of my duties, and	ept the appoint with the provid I I am familian	tment a. isions o with a	s of all nd
Registered Agent's Signa	nture (REQUIRED)	SECRETAI TALLAHAS	2015 FEB 21	Sections and the section of the sect

(CONTINUED)

Page 1 of 2

Company:			
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
AMBR	RAFAEL D. MOROS GAMEZ		
	300 NE 62 STREET		
	MIAMI, FL 33138		
			
(Use attachment if necessary)			
RTICLE VI: Other provisions, if any.			
REQUIRED SIGNATURE:			
	er or an authorized representative of		
	 (1) (b), Florida Statutes, the execution of nalties of perjury that the facts stated he 		
	submitted in a document to the Departm		
constitutes a third degree felony as pro			
BAEAEL D. MODO	S CAMEZ	2015 SEC	وفعوس
RAFAEL D. MORO T	yped or printed name of signee	FEB CRET LAHI	
•	ypan ar brunen mune ar erBree	25 TAR	1
Filing Fees:		army and .	177
	of Organization and Designation	PM 1:09 OF STATE E.FLORID	
of Registered Agent	•	H 1:0 FSIAT	No. and
\$ 30.00 Certified Copy (Optio	•	라는 09	
\$ 5.00 Certificate of Status (6	•		
	Page 2 of 2		

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

ARTICLE IV-