

(Requestor's Name) (Address) (Address)	700269599277	
(City/State/Zip/Phone #)	03/03/1501004006 **185.00	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	TALLANASS	
W15-199167 WRONIG FORMI	ILED INARY OF STATE	
Office Use Only	K.SALY EXAMINER	



# FLORIDA DEPARTMENT OF STATE Division of Corporations

March 20, 2015

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IL DEMATON SERVICES

MICHAEL RECKLEY 18171 SE ISLAND DR. TEQUESTA, FL 33469

SUBJECT: SPEEDKRAFT LLC Ref. Number: W15000019967

We have received your document for SPEEDKRAFT 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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 715A00005696

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### **COVER LETTER**

TO:	Registration Section	
	Division of Corporations	

Speed SUBJECT: 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:

Island <u>181</u> State and Zip Code PeedKra C

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

at ( 248 hael (Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

**\$150.00** Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)

□\$155.00 Filing Fees and Certificate of Status

□\$180.00 Filing Fees and Certified Copy

■\$185.00 Filing Fees, Certified Copy, and Certificate of Status

# STREET ADDRESS:

**Registration Section Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

**MAILING ADDRESS: Registration Section Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

INHS11 (02/14)

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FILED 2015 MAR 30 PM 1:48 SLORE TAKY OF STATE ALLAHASSEE, FLORIDS

<u>Articles of Conversion</u> For <u>"Other Business Entity"</u> Into <u>Florida Limited Liability Company</u>

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: $Soep \downarrow Krrr f \downarrow \downarrow$
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of The State of Michigan
on <u>10-26-2010</u> (date of organization, formation or incorporation) (Enter state, or if a non-U.S. entity, the name of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Speed Kraft 16C

(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 all applicable statutes.

Page 1 of 2

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Signed this <u>30 th</u> day of <u>March</u>	_20_ <i>15</i>	FILED		
Signature of Authorized Representative of Limited Liability Configance:				
Signature of Authorized Representative: Printed Name:Michaeleckley	Title:	2015 MAR 30 PH 1:48 SECRETARY OF STATE TALLAHASSEF. FLORIDA		
Signature(s) on behalf of Other Business Entity:		SEE . EL ORIDA		
Signature: Mahuel Julie				
Signature:	Title: <u>OWAEC</u>			
Signature:				
Printed Name:	Title:			
Signature: Printed Name:	Titla			
	,			
Signature: Printed Name:		<i>,</i>		
Signature:				
Printed Name:	Title:			
Signature:				
Printed Name:				
If Florida Corporation;				
Signature of Chairman, Vice Chairman, Director, or ( If Directors or Officers have not been selected, an Inc	Officer.			
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners,	v Limited Partnership:			
All others:				
Signature of an authorized person.				
<u>Fees:</u>				
Articles of Conversion:	\$25.00			
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)			
Certificate of Status:	\$5.00 (Optional)			
F	Page 2 of 2			

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

INSMAR 30 PH 1:48

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

## Speedkraft LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

## **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:	
18171 SE Island Dr	18171 SE Island Dr	
Tequesta, FL 33469	Tequesta, FL 33469	

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Michael Reckley	
Na	me
18171 SE Island Dr	
Florida street address (	P.O. Box <u>NOT</u> acceptable)
Tequesta	<sub>FL</sub> 33469
City	Zip

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

#### **ARTICLE IV-**

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

Title:

"AMBR" = Authorized Member "MGR" = Manager AMBR Name and Address:

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(Use attachment if necessary)

... ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

**REQUIRED SIGNATURE;** UN Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) lichael Reckle Typed or printed name of/signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) Page 2 of 2