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(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phon	e #)
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Certified Copies	Certificate	s of Status
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2015 JUN 22 PHIZ: 49
SECRETARY OF STATE
WALLAMASSEE, FI ORIG.

JUN 2 6 2015

COVER LETTER

"Other

TO:	Registration S Division of C			d.
SUBJ	IECT: Lawson	Aschenbach Racin	a. L.L.C.	
2020			of Resulting Florida Limite	ed Company)
				nd fees are submitted to convert an accordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this matter to:	
	La	wson Aschenbach		
		(Contact Person)	_	
	Lawson A	Aschenbach Racing,	L.L.C.	
		(Firm/Company)		
	12	2241 Aviles Circle		
		(Address)	· · · · · · · · · · · · · · · · · · ·	
	Palm Be	ach Gardens, FL 33	418	
	((City, State and Zip Code)		
	Lawson@	LawsonAschenbac	h.com	
E-n	nail Address: (to b	e used for future annual re	port notifications)	
For fu	rther information	on concerning this mat	ter, please call:	
	Lawson Asc	henbach	at (301) 58	0-5525
	(Name of Conta	ct Person)		ytime Telephone Number)
Enclo	sed is a check f	or the following amou	nt:	
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	Certified Copy, and Certificate of Status
STRE	ET ADDRESS	S:	MAILING A	ADDRESS:
	tration Section		Registration	
	on of Corporati	ions	Division of C	
	n Building	a	P. O. Box 63	
	Executive Center lassee, FL 3230		Tallahassee,	FL 32314

INHS11 (02/14)

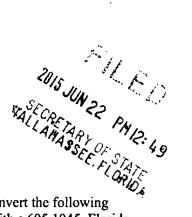
Articles of Conversion

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.

Lawson Aschenbach Racing, L.L.C. (Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Limited Liability 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 Maryland	
on 10/25/2006 (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 Organiza	ition:
Lawson Aschenbach Racing, L.L.C.	
(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 to date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as the eff 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

a: 12 b 1 2 7	50 Jem
Signed this 17th day of June	
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:	Citle: Managing Member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).}
Signature: W. Jaker	
Printed Name: Ascherica	Title: Managing Menser
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Tial
Fined Name.	
Signature:	Title
<u>If Florida Corporation:</u> Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fces:	,
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMBANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address:

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

Mailing Address:
Lawson Aschenbach
12241 Aviles Circle
Palm Beach Gardens, FL 33418

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:

Lawson Aschenbach	
Name	
12241 Aviles Circle	
Florida street address (P.O. Box NO	T acceptable)
Palm Beach Gardens FL	33418
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.,

(CONTINUED)

Page 1 of 2

. :	The name and address of each per Company:	rson authorized to manage and control the Limited Liability
	<u>Title:</u> "AMBR" = Authorized Member "MCP" = Manager	Name and Address:
	"MGR" = Manager MGR	Lawson Aschenbach
		12241 Aviles Circle
		Palm Beach Gardens, FL 33418
	-	
		#
f an or 9	effective date is listed, the date mode days after the date of filing.) CLE VI: Other provisions, if any.	the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days p
·	REQUIRED SIGNATURE:	
	() T	
	Cianatura A a man	J see
c I	In accordance with section 605.020 onstitutes an affirmation under the p	10 or an authorized representative of a member. (3 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. In submitted in a document to the Department of State
c I	In accordance with section 605.020 onstitutes an affirmation under the pam aware that any false information	10 or an authorized representative of a member. (3 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. In submitted in a document to the Department of State
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