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| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE TALLAHASSEE FLOHIOA

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COVER LETTER

| TO: Registration Section | | |
|---|--|-----|
| Division of Corporations | | |
| SUBJECT: LB Aircraft Engineering, LLC | | |
| (Name of I | Resulting Florida Limited Company) | |
| | s of Organization, and fees are submitted to convert an "Ot bility Company" in accordance with s. 605.1045, F.S. | her |
| Please return all correspondence concerning the | his matter to: | |
| Ellen English | | |
| (Contact Person) | | |
| Wargo & French LLP | | |
| (Firm/Company) | | |
| 201 S. Biscayne Blvd., Suite 1000 | | |
| (Address) | | |
| Miami, FL 33131 | | |
| (City, State and Zip Code) | | |
| jaysalazar@lbaircraftengineering.com | | |
| E-mail Address: (to be used for future annual repor | rt notifications) | |
| For further information concerning this matter | r, please call: | |
| Ellen English | at (305) 777-6025 | |
| (Name of Contact Person) | (Area Code) (Daytime Telephone Number) | |
| Enclosed is a check for the following amount: | : | |
| - | □\$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 | |



Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

16 FEB -4 PH 2: 05

SECTETATIV OF STATE TALLAHASSEE, FLORIDA

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 Entit LB Aircraft Engineering, Inc. 108 – 5 | ty" immediately prior to the filing of the Articles of Conversion is: |
|---|--|
| | e of Other Business Entity) |
| 2. The Other Business Entity is a | ration |
| (Enter | entity type. Example: corporation, limited partnership, leral partnership, common law or business trust, etc.) |
| First organized, formed or incorporated u | nder the laws of the State of Florida |
| June 13, 2008 | (Enter state, or if a non-U.S. entity, the name of the country) |
| (date of organization, formation or incorporat | ion) |
| 3. The name of the Florida Limited Liabi | lity Company as set forth in the attached Articles of Organization: |
| LB Aircraft Engineering, LLC | |
| (Enter Name of Flor | ida Limited Liability Company) |
| 4. If not effective on the date of filing, en | iter the effective date: |
| date this document is filed by the Florid | to date of receipt or filed date nor more than 90 days after the da Department of State; <u>AND</u> 2) must be the same as the effective |
| | rganization, if an effective date is listed therein.) neet the applicable statutory filing requirements, this date will not be listed as the tate's records. |
| 5. The plan of conversion has been approx | yed in accordance with all applicable statutes |

Page 1 of 2

| Signed this 23 day of January | 20 16 | Arronal ANO FILED |
|---|--|--|
| Signature of Authorized Representative of Limit | ed Liability Company: | |
| Signature of Authorized Representative: Lindelena Barquero-Salazar | Title: Member | 16 FEB -4 PM 2: 05 SECRETARY OF STATE |
| Signature(s) on behalf of Other Busiless Entity: | See below for required signatu | THE REMOVEE HITTENING |
| Signature: Landeline Valaya | | |
| Printed Name: Lindelena Barquero-Salazar | Title: President | , |
| Ciamatura | | |
| Signature: Printed Name: | Title: | |
| | | |
| Signature:Printed Name | | |
| Printed Name: | _ Title: | · · · · · |
| Signature: | | |
| Printed Name: | Title: | |
| • | | |
| Signature:Printed Name: | Title | |
| | _ Title: | 6 B 1. |
| Signature: | · | |
| Signature:Printed Name: | Title: | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. | Officer | |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner. | y Partnership: | |
| If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners. | y Limited Partnership: | \$ |
| All others: Signature of an authorized person. | | |
| Fees: | | |
| 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 COMPANY

| ARTICLE I - Name: The name of the Limited Liability Co | mpany is: |
|--|---|
| LB Aircraft Engineering, LLC (Must end with the words "I | imited Liability Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address | s of the principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 6355 NW 36 Street Suite 510 | 6355 NW 36 Street Suite 510 |
| Miami, FL 33166 | Miami, FL 33166 |
| ARTICLE III - Registered Agent, I (The Limited Liability Company cannot serve as business entity with an active Florida registration) The name and the Florida street addresses Lindelena Barq | ess of the registered agent are: |
| Elifoeiaria Darq | Name |
| 6355 NW 36 St | reet, Suite 510 dress (P.O. Box NOT acceptable) |
| | · · |
| <u>Miami</u> | FL 33166ty Zip |
| Ci | .y Zip |
| liability company at the place de | gent and to accept service of process for the above stated limited signated in this certificate, I hereby accept the appointment as 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- | 16 f Ł | B-4 PH 2:05 |
|---|---|---------------------------------------|
| | n authorized to manage and control the Limited Lia | bility |
| Company: | _SEC# | HASSEE FLORIDA |
| | TALLA | HASSIFE GLODION |
| <u>Title:</u> | Name and Address: | , , , , , , , , , , , , , , , , , , , |
| "AMBR" = Authorized Member | | |
| "MGR" = Manager | | |
| MGR | Jay Salazar | |
| | 6355 NW 36 Street, Suite 510 | |
| | Miami, FL 33166 | |
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| (Use attachment if necessary) | | |
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| ARTICLE V: Effective date, if other than th | e date of filing: (OPTION | NAL) |
| If an effective date is listed, the date must | be specific and cannot be more than five busines | s days prior |
| o or 90 days after the date of filing.) | of specific and cannot be more than live oughter | s days prior |
| o or you day's after the date of iming. | | |
| ARTICLE VI: Other provisions, if any. | | |
| THE ROLL VII OLIGI PROVISIONS, IT MAY. | | |
| | | |
| | | |
| | | |
| REQUIRED SIGNATURE: | O | |
| REQUIRED SIGNATURE; | - 3/0 | |
| Ludde | u / Jolana | |
| | () (see) | |
| Signature of a memor | er or an authorized representative of a member. | |
| | 1) (b), Florida Statutes, the execution of this docum | |
| | alties of perjury that the facts stated herein are true. Jobal true in a document to the Department of State | |
| constitutes a third degree felony as prov | | |
| constitutes a unit degree letotry as pro- | ruca for itt 5.617.100, (1.5.) | |
| Lindelena Barquero | o-Salazar | |
| Ty | /ped 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)