# 1600050911

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

Office Use Only



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### **COVER LETTER**

то:	Registratio Division of	n Section Corporations				
SUBJ	ECT:	PRINTECH	EXDY	EGS	•	
0020		(Na	me of Re	sulting Florida I	Jimite	d Company)
				-		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all co	orrespondence concer	ming this	s matter to:		
	WALTER	MYCEK (Contact Person)				
<del> </del>	PRIME	(Contact Person)  EYPWS 2  (Firm/Company)	<u> </u>			
	8484	BRITTANIH D	Rive			
	FORT	(Address) MYEVS, FL 3	33912	2		
		(City, State and Zip Coo	de)			
E-n		o be used for future annu		otifications)		
For fu	rther informa	ation concerning this	matter, j	please call:		
	WALTER	mycek	at (	(239)	57	01-9514
	(Name of Co	ntact Person)		(Area Code)	(Day	time Telephone Number)
Enclo	sed is a check	k for the following ar	nount:			
(\$25 fo & \$125	0.00 Filing Fee or Conversion 5 for Articles anization)	s \$155.00 Filing Fe and Certificate of Status	es 🔲 s	\$180.00 Filing F I Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	ET ADDRI					ADDRESS:
_	tration Section			Registra		
	on of Corpoi n Building	auons		P. O. Bo		orporations 27
	Executive Ce	enter Circle				FL 32314

Tallahassee, FL 32301



January 28, 2016

WALTER MYCEK 8484 BRITTANIA DRIVE FORT MYERS, FL 33912

SUBJECT: PRINTECH EXPRESS, LLC

Ref. Number: W16000006049

We have received your document for PRINTECH EXPRESS, LLC and your check(s) totaling \$155.00. 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.

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) 245-6052.

Maryanne Dickey Regulatory Specialist II

Letter Number: 016A00001886

Division of Companytions DO DOV 6207 Tollahoggas Florida 2021

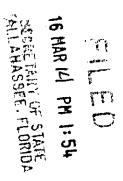
#### **Articles of Conversion**

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 Articles of Conversion is:  PRINTECH EXPLOSE. LAC.
PRIMTECH EXPYESS, TAC.  (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
on February 6, 2004.  (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:
PRIWIECH EXPRES, LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: FEBRARY C, 2016  (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; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Page 1 of 2

5. The plan of conversion has been approved in accordance with all applicable statutes.

	•				
Signe	d this/_ day of				
Signa	ture of Authorized Representative of Lind	ted Liability Company:			
Signat Printed	ture of Authorized Representative:  d Name: NACIER MYCEK	Soll Tille: President	THE STATE OF THE S	16 F	•
Signat	ture(s) on behalf of Other Business Entity:	[See below for required signature(s)]	AHAS:	HAR H	
Signat	ure:	0	图录:	-13	
Printe	ure: WHITER MYCSEL	Title: Kresident	光 - 三流	R	
	•	•	JE STANE . FLORID	12:	Name of Street
Printe	ure:d Name:	Title:	- <u>G</u> m	#	
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Printe	ure:d Name:	Title:	- -		
Signat	ure: i Name:	Title	-		
Time	i Name.		-		
	ida Corporation:				
	ure of Chairman, Vice Chairman, Director, or				
II Unre	dors of Officers have not been selected, an Ind	corporator must sign.			
If Floi	ida General Partnership or Limited Liabili	ty Partnership:			
Signat	ure of one General Partner.	<del></del>			
If Flor	rida Limited Partnership or Limited Liabili	ty I imitad Dartnarshin.			
	ures of ALL General Partners.	ty Limited Farthership.			
	A TOUR.				
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Signat	ure of an authorized person.				
Fees:	of Grand				
		005.00			
	Articles of Conversion:	\$25.00			
	Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)			
	Certificate of Status:	\$5.00 (Optional)			

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

(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  Principal Office Address:  Mailing Address:  System Bhintania Dr.  FT. MYCRS, FL. 33912  ARTICLE III - Register ed Agent, Register ed Office, & Register ed 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:  White MyCell Name  8484 BRITTANIA DR.  Florida street address (P.O. Box NOT acceptable)  FORT MYCES  City  Zip  Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provision statutes relating to the proper and complete performance of my duties, and I am familiar with		_ <del>_</del>	26		RIMTECH EXPRESS,
Principal Office Address:    Sugar   British	, ř.	MAR	全部	Company, "L.L.C.," or "LLC.")	(Must end with the words "Limited Liab
Principal Office Address:    Sugar British Dr.   Sugar British Dr.	Total Papers	E	ASS		
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:    Where Myche Name	ny is	) Tamp	_iability C	ncipal office of the Limited I	lress and street address of the
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:    Where Mycell   Name		••	22 22 22 22 22	Mailing Address:	e Address:
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	nt as	ointm	ot the appo	his certificate, I hereby accep	mpany at the place designated
accept the obligations of my position as registered agent as provided for in Chapter 605, I	nt as ns oj th ar	ointm rovisi liar w	ot the appo vith the pr I am fami	this certificate, I hereby accep y. I further agree to comply v erformance of my duties, and .	mpany at the place designated ent and agree to act in this capa ting to the proper and complete

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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<u>Title:</u>	Name and Address:	The state of the s
"AMBR" = Authorized Member		
"MGR" = Manager		変数 正 下
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**ARTICLE IV-**