# L16000127245

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	ə #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
:		

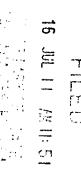
Office Use Only

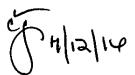
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### COVER LETTER

Division of C				
SUBJECT: Fleet Salv	rage Systems, LLC			
		of Resulting Florida Limite	ed Company)	
	•	_	d fees are submitted to ccordance with s. 605.	
Please return all corre	espondence concernin	g this matter to:		
Kimberly Towers				
	(Contact Person)			
Fleet Salvage Systems, L	LC			
	(Firm/Company)			
754 Fleet Financial Cour	t, #300			
	(Address)			
Longwood, FL 32750				
((	City, State and Zip Code)	· · · · · · · · · · · · · · · · · · ·		
kim@fleetfinancial.net				
E-mail Address: (to b	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
Kimberly Towers		_at (407) <sup>834-3</sup>	3400	
(Name of Conta	ct Person)	(Area Code) (Day	time Telephone Number)	_
Enclosed is a check f	or the following amou	ınt:		
\$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	16 July F
STREET ADDRESS Registration Section Division of Corporat Clifton Building	ions	MAILING A Registration Division of C P. O. Box 63	Section Corporations	
2661 Executive Cent	er Circle	Tallahassee.	FL 32314	

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

FILED

16 JUL II AM II: 51

April 18, 2016

KIMBERLY TOWERS 754 FLEET FINANCIAL COURT #300 LONGWOOD, FL 32750

SUBJECT: FLEET SALVAGE SYSTEMS, LLC

Ref. Number: W16000028542

We have received your document for FLEET SALVAGE SYSTEMS, 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):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by all of the general partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return the corrected original and one copy of 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 316A00007971

RECEIVED

6 JULI PREME

#### **Articles of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

FILED 16 JULII MII: 5

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.

The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conver	sion is:
(Enter Name of Other Business Entity) P9700048091	
The "Other Business Entity" is a Corporation.	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
rst organized, formed or incorporated under the laws of Florida	
June 02, 1997 (Enter state, or if a non-U.S. entity, the name of the co	untry)
(date of organization, formation or incorporation)	
The name of the Florida Limited Liability Company as set forth in the attached Articles of Orga	nization:
eet Salvage Systems, LLC	
(Enter Name of Florida Limited Liability Company)	
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 af ate this document is filed by the Florida Department of State; AND 2) must be the same as the ate listed in the attached Articles of Organization, if an effective date is listed therein.)  ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed under the date on the Department of State's records.	e effective

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

Signed this 07th	_, day of <u>April</u>	20 16	
Signature of Author	rized Representative	of Limited Liability Company:	
		Title President / Mng Member	
Signature of Authori	zed Representative: _	mynus routes	
Printed Name: Kimber	ly Towers	1 Title President / Mng Member	
Signature(s) on beha	alf of Other Business I	Entity:  See below for required signature	re(s)]
Signature:	hut rower	9	
Printed Name:	whooly Towers	Title: Pres Ming Member	<u> </u>
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Printed Name		Title:	
Timed Panio.			
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
If Florida Corporati	on•		
	n, Vice Chairman, Dire	ector, or Officer.	
		ed, an Incorporator must sign.	
10 TO 11 CO 1 TO 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		l Liability Partnership:	
Signature of one Gen	erai Pariner.		
If Florida Limited P	artnership or Limited	Liability Limited Partnership:	
Signatures of ALL G			
All others:			
Signature of an autho	rized person.		
Fees:			
Articles of C	onversion:	\$25.00	, .

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

Page 2 of 2

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	FILED
The name of the Limited Liability Company is:	16 JUL 11 M 11: 51
Fleet Salvage Systems, LLC	TO THE STATE
(Must end with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
754 Fleet Financial Court, #300	754 Fleet Financial Court, #300
Longwood, FL 32750	Longwood, FL 32750
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 registered address of the registered address.	ered Agent. You must designate an individual or another
Michael Towers	
Name	
754 Fleet Financial Court, #300	
Florida street address (P.O.	Box NOT acceptable)
Longwood,	FL 32750
City	Zip
	and a surious of annous for the above stated limited

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

The name and address of each person Company:	authorized to manage and contro	<i></i>
Company.		FILED
Title:	Name and Address:	16 JUL 11 MIL 51
"AMBR" = Authorized Member		
"MGR" = Manager MGR	Vimbarly Tayyara	
MGR	Kimberly Towers 754 Fleet Financial Court, #300	The state of the s
	Longwood, FL 32750	<del>, , , , , , , , , , , , , , , , , , , </del>
MGR	Michael Towers	
	754 Fleet Financial Court, #300	
	Longwood, FL 32750	
		· · · · · · · · · · · · · · · · · · ·
	-	
RTICLE V: Effective date, if other than the fan effective date is listed, the date must or 90 days after the date of filing.)  ote: If the date inserted in this block does not meet to cument's effective date on the Department of State's	be specific and cannot be more  the applicable statutory filing requirements	than five business days prior
RTICLE VI: Other provisions, if any.		
		· · · · · · · · · · · · · · · · · · ·
DECLUDED CLOSE ATURE		
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:		
Limited	our an authorized representative	vo of a mambar
Signature of a membe	or an authorized representative coordance with section 605.0203 (1) (b),	ve of a member. Florida Statutes.
Signature of a membe This document is executed in at I am aware that any false inform	scordance with section 605.0203 (1) (b), ation submitted in a document to the De	Florida Statutes.
Signature of a member This document is executed in at I am aware that any false informationstitutes a third degree felony	ecordance with section 605.0203 (1) (b),	Florida Statutes.
Signature of a membe This document is executed in at I am aware that any false inform constitutes a third degree felony Kimberly Towers	ecordance with section 605.0203 (1) (b), nation submitted in a document to the De as provided for in s.817.155, F.S.	Florida Statutes.
Signature of a membe This document is executed in at I am aware that any false inform constitutes a third degree felony Kimberly Towers	ccordance with section 605.0203 (1) (b), ation submitted in a document to the De as provided for in s.817.155, F.S.  ped or printed name of signee	Florida Statutes.
Signature of a membe This document is executed in at I am aware that any false inform constitutes a third degree felony Kimberly Towers	ccordance with section 605.0203 (1) (b), ation submitted in a document to the De as provided for in s.817.155, F.S.  ped or printed name of signee  Filing Fees	Florida Statutes. partment of State

ARTICLE IV-