# L1600161883

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only

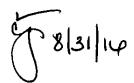


700289682237

700289682237 08/31/16--01001--003 \*\*150.00

16 AUG 30 AH II: 06

16 AUG 30 PM 3: 53



**CAPITAL CONNECTION, INC.**417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Harbour Group Con	sulting Inc.		
Conver.	Sion	Art of Inc. File	
		LTD Partnership File	
		Foreign Corp. File	
		L.C. File	<b>.</b> 5
		Fictitious Name File	<u>:</u>
		Trade/Service Mark	ى ئ
		Merger File	
		Art. of Amend. Files	
		RA Resignation G	) )
		Dissolution / Withdrawal	-
		Annual Report / Reinstatement	<del></del>
		Cert. Copy	
		Photo Copy	
		Certificate of Good Standing	<del></del>
		Certificate of Status	
		Certificate of Fictitious Name	
		Corp Record Search	
		Officer Search	
		Fictitious Search	
Signature		Fictitious Owner Search	
		Vehicle Search	
		Driving Record	
Requested by: SETH	08/30/16	UCC 1 or 3 File	
Name	<del></del>	UCC    Search	
THEFT		UCC 11 Retrieval	
Walk-In Thomasville, GA 87	Will Pick Up _	Courier	

### Articles of Conversion For "Other Business Entity" Into

## FILED 16 AUS 30 AN III 06

### 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.

Harbor Group Consulting Inc. (Ente	r Name of Other Business Entity) P11000033054
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 incorpora	ted under the laws of
on (date of organization, formation or inco	rporation)
3. The name of the Florida Limited	Liability Company as set forth in the attached Articles of Organization:
Harbor Group Consulting, LLC	
(Enter Name o	of Florida Limited Liability Company)
(	
	og, enter the effective date: 8/31/16 at 12:01AM (ET)
4. If not effective on the date of filir (The effective date: 1) cannot be p date this document is filed by the l date listed in the attached Articles	ng, enter the effective date:  8/31/16 at 12:01AM (ET)  prior to date of receipt or filed date nor more than 90 days after the Florida Department of State; AND 2) must be the same as the effective of Organization, if an effective date is listed therein.)  s not meet the applicable statutory filing requirements, this date will not be listed as the att of State's records.

Page 1 of 2

Signed.	this <u>30th</u> day o	of August	20 16		
-			ted Liability Company:		
Signatu Printed	re of Authorized Rep Name: Michael Liebow	oresentative:	Title: Chief Executive Officer		
Signatu		ther Dusiness Entity:	See below for required signature(s)]		
Signatu	re: Mishael Lishaw	<u> </u>	Title: Chief Executive Officer		
Printed:	Name: Michael Liebow	1120			
Signatur	re:				
Printed	Name:		Title:		
Signatu	re:				
Printed.	Name:		Title:		
Signatu	re:				
Printed	Name:		Title:		
Signatu	re:				
Printed	Name:		Title:		
Sionatu	re,				
Printed	Name:		Title:		
If Elovi	da <u>Corporation:</u>				
		Chairman, Director, or	Officer.		
If Direc	tors or Officers have	not been selected, an In-	corporator must sign.		
	da General Partners re of one General Par	ship or Limited Liabili tner	ty Partnership:		
		hip or Limited Liabili Partners.	ty Limited Partnership:		
<u>All othe</u> Signatu	ers: re of an authorized pe	erson.			
Fees:				<i>;=</i> .	<del>-</del> 5
	Articles of Conversi Fees for Florida Arti	on: icles of Organization:	\$25.00 \$125.00		964
	Certified Copy:		\$30.00 (Optional)		3
	Certificate of Status	!	\$5.00 (Optional)	7 0	
					_

### EFFECTIVE DATE 08 31 10

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		FILED
ARTICLE I - Name:		16 400 00 40 00
The name of the Limited Liability Company	is:	16 AUG 30 M II: 06
Harbor Group Consulting, LLC		1012 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
(Must end with the words "Limited Lie	ability Company, "L.L.C.," or "	LLC.")
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the I	Limited Liability Company is:
		ominoc Blacking Company is.
rincipal Office Address:	Mailing Address:	
4400 Biscayne Boulevard, Suite 818	4400 Biscayne Boulev	ard, Suite 818
Miami, FL 33137	Miami, FL 33137	,
National Corporate Research, National Corporate Research,	<del></del>	
115 North Calhoun St., Suite 4	<del></del>	
Florida street address (P	.O. Box NOT acceptable	<i>e</i> )
Tallahassee	FL 32301	
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap		cess for the above stated limited
statutes relating to the proper and complet accept the obligations of my position as i	acity. I further agree to te performance of my dut	by accept the appointment as comply with the provisions of all ies, and I am familiar with and
statutes relating to the proper and complet accept the obligations of my position as t	acity. I further agree to te performance of my dut registered agent as provi	by accept the appointment as comply with the provisions of all ies, and I am familiar with and

(CONTINUED)

Page 1 of 2

Сотрапу:	on authorized to manage and control the		FI		
Title:	Name and Address:	16	AUG	30	周田: 06
"AMBR" = Authorized Member		,			
"MGR" = Manager AMBR	HGC Stockholder Holdco, Inc.	•		,	
ANDA	4400 Biscayne Boulevard, Suite 818				
	Miami, FL 33137			_	
	******	•		_	
		•		_	
				_	
·				_	
				_	
				_	
				_	
				_	
(Use attachment if necessary)					
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date mus to or 90 days after the date of filing.)  Note: If the date inserted in this block does not meed document's effective date on the Department of States.	t be specific and cannot be more than t the applicable statutory filing requirements, t	n five	busin	ess (	lays prior
ARTICLE VI: Other provisions, if any.					
	lly				<u>-</u> -
	0			_	
Signature of a memb	er or an authorized representative of accordance with section 605.0203 (1) (b), Flor	fa me	ember	•.	
I am aware that any false infor-	mation submitted in a document to the Departm y as provided for in s.817.155, F.S.	nent of	State		

ARTICLE IV-

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

Michael Liebowitz