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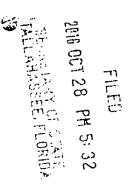
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Special Instructions to	Filing Officer:	

Office Use Only



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### **COVER LETTER**

TO: Registration Section  Division of Corporations
SUBJECT: Performance Tempo Coron L/C (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Chris Whity  (Contact Person)  Performance Tempo (orong UC)  (Firm/Company)
120 Seaslass Drive
Melhoune Beach FL 32951  (City, State and Zip Codé)  Chris, Whity Optor Jorg Usa. Com  E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (202) 701-U979 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$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  Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P. O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

# **Articles of Conversion**

For

## "Other Business Entity"

Into

## Florida Limited Liability Company

FILED

2016 OCT 28 PM 5: 32

JEURETARY OF STATE
TALL AHASSEE, 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 Entity" immediately prior to the filing of the Articles of Conversion is:
Pertormance Tempo (evoid ((Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Plife(Mance Tempo (coo L.L
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 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.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

Signed this 26 day of October	· <del>-</del>
Signature of Authorized Representative of Limit	red Diability Company:
Signature of Authorized Representative.  Printed Name: Chris white	Title: CEO TOWNE (IMPROPER FLORIDA
Signature(s) on behalf of Other Business Entity: [5]	See below for required signature(s)]
Signature: Printed Name: Chv.5 Wh. +ty	Title: CEO OWNEY AABR
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature: Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL 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 Company is:		
Performance Tempor (Must end with the words "Limited Liability	Geroup LLC	
(Must end with the words "Limited Liability	y Company, "L.L.C.,\" or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Co	ompany is:
Principal Office Address:	Mailing Address:	
120 Seaglass Nive Melhorne Beach FC 38951	120 Seaglass Drive Melhoume Beach, Fr. 320	15
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)		
The name and the Florida street address of the re	gistered agent are:	
Chris	1110, the	
Chris U	201119	
	,	
Florida street address (P.O.	Drive	
Florida street address (P.O.	Box NOT acceptable)	
Melbarne Beach	FL 3295	
City	Zip	
Having been named as registered agent and to liability company at the place designated in		
registered agent and agree to act in this capacit	y. I further agree to comply with the pro	ovisions of all
statutes relating to the proper and complete po	erformance of my duties, and I am famili	ar with and
accept the obligations of my position as regi	sterea agent as provided for in Chapter	
7	Hr. C	<del>-</del>
Registered Agent's Signa	ture (REQUIRED)	FILED
	[16] (16) (16) (16) (16) (16) (16) (16) (16)	စု ကြာ
(CONTINU	JED) Single C	ņ
Page 1 of	DED) SEE C	သ သ
1 age 1 til	<b>=</b>	

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager  AMBY	Chris Whity 120 Seaslass Drive Melbourne Beach FC 32951
	2016 ALL:
	FIL AHASSE
	——————————————————————————————————————
	• ω
ICLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.)	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days  the applicable statutory filing requirements, this date will not be listed
ICLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meet ment's effective date on the Department of State.  ICLE VI: Other provisions, if any.	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days  the applicable statutory filing requirements, this date will not be listed
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ICLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meet ment's effective date on the Department of State.  ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member of this document is executed in a I am aware that any false inform	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days  the applicable statutory filing requirements, this date will not be listed
ICLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meet ment's effective date on the Department of State.  ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member This document is executed in a I am aware that any false inform constitutes a third degree felony.	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days  the applicable statutory filing requirements, this date will not be listed 's records.  er or an authorized representative of a member.  accordance with section 605.0203 (1) (b), Florida Statutes.  mation submitted in a document to the Department of State

Page 2 of 2

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-