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Office Use Only



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T. BURCH MAR 2 9 2017

COVER LETTER

Division of C	orporations				
SUBJECT: Solvicity	LLC				
SUBJEC1	(Name of Res	ulting	Florida Limit	ed Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this	s matter to:		
Bryan Tye					
	(Contact Person)				
Solvicity					
	(Firm/Company)				
439 Harbor Dr N					
	(Address)				
Indian Rocks Beach, FL	33785				
·	City, State and Zip Code)				
corp@solvicity.com					
E-mail Address: (to b	e used for future annual re	ort n	otifications)		
For further information	on concerning this ma	ter,	please call:		
Bryan Tye		at (813	480-8	8621
(Name of Conta	ct Person)		(Area Code)	(Day	rtime Telephone Number)
	or the following amou a bank located in the			rocess	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	3:		MAILI	NG A	ADDRESS:
Registration Section			Registr		
Division of Corporati	ons				Corporations
Clifton Building 2661 Executive Cent	on Cinala		P. O. B		27 FL 32314
Zoo i executive centi	er Circie		เลเเลกล	VC66	C1. 3/314

Tallahassee, FL 32301

TO: Registration Section



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2017

BRYAN TYE 439 HARBOR DR N INDIAN ROCKS BEACH, FL 33785

SUBJECT: SOLVICITY LLC Ref. Number: W17000012784

We have received your document for SOLVICITY LLC and your check(s) totaling \$150.00. 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.

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 a general partner. If the converting entity is a limited partnership or limited liability limited 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 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.

Tim Burch Regulatory Specialist III

Letter Number: 617A00002892

Division of Comparations D.O. DOV 6297 Tollahogoes Florida 2991

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

17 MAR 28 PH 4: 01

JEWAR ARY OF STATE
ON LAMASSEE, FLORE

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:

Sapphire BTS, Inc.

(Enter Name of C	Other Business Entity)
Corporation 2. The "Other Business Entity" is a	n .
2. The "Other Business Entity" is a(Enter entity general p	type. Example: corporation, limited partnership, partnership, common law or business trust, etc.)
First organized, formed or incorporated under	the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
on	
3. The name of the Florida Limited Liability (Company as set forth in the attached Articles of Organization:
Solvicity LLC	
(Enter Name of Florida Li	mited Liability Company)
4. If not effective on the date of filing, enter the	he effective date:
(The effective date: 1) cannot be prior to date this document is filed by the Florida D date listed in the attached Articles of Organ	ate of receipt or filed date nor more than 90 days after the epartment of State; <u>AND</u> 2) must be the same as the effective nization, if an effective date is listed therein.) ne applicable statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been approved i	n accordance with all applicable statutes.
6. The "Converted or Other Business Entity" ha	s agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

Signed this 3 day of Feb	_ 20_17			
Signature of Authorized Representative of Limi	ted Liability Company:			
Signature of Authorized Representative: Printed Name: Bryan Tye	Title: President	_		
Signature(s)tombehalfotoetherBusiness/Entity:	See below for required signature(s)]			
Signature	_	_		
Printed Name: BRYAN TYB	Title: PRESIDENT	_		
Signature:		_		
Printed Name:	Title:			
Signature:		<u></u>		
Printed Name:		- 52	17 HAR	
Signature:Printed Name:		一部三	25 20	77
Printed Name:	Title:	- 55 C	28	FILED
Signature:Printed Name:			P# -	Ö
Printed Name:	Title:	-37	ተ፡ ዐተ	
Signature: Printed Name:			t.	
Printed Name:	Title:	_		
If Florida Corporation:	O.K			
Signature of Chairman, Vice Chairman, Director, or of If Directors or Officers have not been selected, an Inc.				
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:		٠	
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

Solvicity LLC			
(Must end with the words "Limited I	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	Address:		
The mailing add	ress and street address of th	e principal office of the Limited Liabili	ty Comp
Principal Office	Address:	Mailing Address:	
439 Harbor Dr N		439 Harbor Dr N	
Indian Rocks Beach	n, FL 33785	Indian Rocks Beach, FL 33785	
ARTICLE III - (The Limited Liability	Registered Agent, Regist	ered Office, & Registered Agent's Sig	nature:
(The Limited Liability business entity with a	Registered Agent, Regist Company cannot serve as its own Fan active Florida registration.) e Florida street address of the Bryan Tye	legistered Agent. You must designate an individual o	r another AR 28
(The Limited Liability business entity with a	Company cannot serve as its own Fan active Florida registration.) e Florida street address of t Bryan Tye	legistered Agent. You must designate an individual o	r another AR 28
(The Limited Liability business entity with a	Company cannot serve as its own Fan active Florida registration.) e Florida street address of t Bryan Tye	he registered agent are:	or another
(The Limited Liability business entity with a	Company cannot serve as its own Fan active Florida registration.) e Florida street address of the Bryan Tye A39 Harbor Dr N	he registered agent are:	r another AR 28
(The Limited Liability business entity with a	Company cannot serve as its own Fan active Florida registration.) e Florida street address of the Bryan Tye A39 Harbor Dr N	he registered agent are:	r another AR 28

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

or Dr N cks Beach, FL 33785
cks Beach, FL 33785
cks Beach, FL 33785
Cks Beach, FL 33785
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MAR 28 PH L: LAHLSSEE, FLO
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and cannot be more than five business day
prized representative of a member. ection 605.0203 (1) (b), Florida Statutes. in a document to the Department of State in s.817.155, F.S.

Page 2 of 2

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-