L17000082856

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
(61), 21612, p. 11610, n,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

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T. BURCH APR 1 3 2017

COVER LETTER

TO: New Filing ! Division of O		_		
SUBJECT:	Air Hars (Name of R	esulting Florida Limited Co	mpany)	Technologi
		cles of Organization, a Liability Company" in a		ubmitted to convert an "Other vith s. 605.1045, F.S.
Please return all cor	respondence concerni	ng this matter to:		
Silvey 1290 Weston, annual E-mail Address: (to	(Contact Person) (Firm/Company) (Firm/Company) (Address) T 333 (City, State and Zip Code) he used for future annual in	PKS EGAL report notifications)	218 . Com)
Richard	ion concerning this m		3X4 1)	99D
(Name of Con	tact Person)	at (<u>954</u>) (Area Code) (Da	ytime Telephor	ne Number)
	for the following among a bank located in the		ssed by this o	office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	□\$185.00 I Certified Co Certificate c	ppy, and
STREET ADDRESS New Filing Section Division of Corpora		MAILING . New Filing ! Division of 0		

P. O. Box 6327

Tallahassee, FL 32314

32301

Clifton Building

2661 Executive Center

Circle Tallahassee, FL

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: ATT HAS WAY TO DIVE TECH LOCALES,
(Enter Name of Other Business Entity) 2. The "Other Business Entity" is a COCOCOCOCOCOCOCOCOCOCOCOCOCOCOCOCOCOC
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 Ar Mashall Turbine Technologies Luce (Enter Name of Florida Limited Liability Company)
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 calendar 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.

6. The "Converted or Other Business Entity" has 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.

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

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:
2870 Shrling Rd	2870 Strling Rd 1044wood, 7033020
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 results	egistered agent are: Signate an individual of another? Signate an individual of another?

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 Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Donald E. Marshall
•	7870 STO STO ROLL BOOK
	7
effective date is listed, the date must	ne date of filing:
CLE. V: Effective date, if other than the effective date is listed, the date must to or 90 calendar days after the date of the date inserted in this block does not meet that's effective date on the Department of State's	ne date of filing: t be specific and cannot be more than five business d of filing.) the applicable statutory filing requirements, this date will not be list
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CLE V: Effective date, if other than the effective date is listed, the date must to or 90 calendar days after the date of the date inserted in this block does not meet tent's effective date on the Department of State's CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membe This document is executed in act am aware that any false inform constitutes a third degree felony.	t be specific and cannot be more than five business d of filing.) the applicable statutory filing requirements, this date will not be list is records. er or an authorized representative of a member. the applicable statutorized representative of a member. the accordance with section 605.0203 (1) (b). Florida Statutes. The accordance with section 605.0203 (1) (b) accordance to the Department of State

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

ARTICLE IV-