L17000082865

(Re	equestor's Name)	
(Ad	Idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	· #)
<u></u>	WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

N. SAMS



900297677709

04/10/17--01024--008 **150.00



COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: K9 Power Products, LLC	
(Na	me of Resulting Florida Limited Company)
	on, Articles of Organization, and fees are submitted to convert an "Other mited Liability Company" in accordance with s. 605,1045, F.S.
Please return all correspondence co	oncerning this matter to:
Gerry Coughlin	
(Contact Perso	on)
K9 Power Products, LLC	
(Firm/Compa	ny)
100 \$ Ashley Dr Suite 1130	
(Address)	
Tampa, FL 33602	
(City, State and Zi	p Code)
gerry@k9power.com	
E-mail Address: (to be used for future	annual report notifications)
For further information concerning	this matter, please call:
Janet Huffman	at (941)929-5450
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located	ng amount: (All checks processed by this office must be payable in US d in the United States)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	
STREET ADDRESS:	MAILING ADDRESS:
New Filing Section	New Filing Section
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327
Clifton Building 2661 Executive Center	Tallahassee, FL 32314
Circle Tallahassee, FL	

32301

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.

K-9 Power Products, LLC	usiness Entity" immediately prior to the filing of the Articles of Conversion is:	
	(Enter Name of Other Business Entity)	
2. The "Other Business Entit	ty" is a	
(Enter entity type, Example: corporation, limited partnership, general partnership, common law or business trust, etc.)		
First organized, formed or inc	corporated under the laws of Connecticut	
January 15, 1999	(Enter state, or it a non-U.S. entity, the name of the country)	
on (date of organization, formatio	n or incorporation)	
3. The name of the Florida L K9 Power Products, LLC	cimited Liability Company as set forth in the attached Articles of Organization:	
(Ente	r Name of Florida Limited Liability Company)	

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.

Signed this total day of Pry: 20 17		4-			
Signature of Authorized Representative of Lim	, ,	17	320 TO	M 2:59	
Signature of Authorized Representative:	· / •	1	·	* 12 1	
Signature(s) on behalf of Other Business Entity:	[See below for required signatu	re(s)]			
Printed Name John Sequipo	Title: Manager				
Signature:Printed Name:					
Signature:Printed Name:	Title:				
Signature:Printed Name:					
Signature:Printed Name:					
Signature:Printed Name:	Title:				
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer. Icorporator must sign.				
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:				
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	tv 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

K9 Power Products, LLC		
(Must contain the words "Limited	Liabibty Company, "L.L.C." of "LLC")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Liability Compan	y 18.
Principal Office Address:	Mailing Address:	
100 S Ashley Dr. Suite 1130	100 S Ashley Dr. Suite 1130	
Tampa, FL 33602	Tampa, FL 33602	
(The Limited Liability Company cannot serve as its ov- business entity with an active Florida registration)	istered Office, & Registered Agent's Signature: vn Registered Agent. You must designate an individual or another	
The name and the Florida street address of	of the registered agent are:	:
- Ashley	Petrie S	
- Ashley	Prace Name Dr. Suite 1130 ss (P.O. Box NOT acceptable)	
- Ashley	Name	

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)