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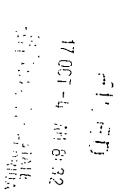
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1

Office Use Only



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COVER LETTER

TO: New Filing So Division of C			
SUBJECT: LXZ Tec	hnologies,LLC		
3013/LC1	(Name of Res	sulting Florida Limited	l Company)
		-	n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:	
Lonzon Burtone	nnelle B	uch	
LXZ Technologies,LLC	<u> </u>		
,	(Firm/Company)		
7648-Topiary-Avenue	- 600 Con	gress Ave	1 33487
<u>BOYNTON BEACHFL</u>	33437 Baca	Ratin F	13348
rhrtree@msn.com	City, State and Zip Code)		
	e used for future annual re	nart natifications	
		•	
For further informati	on concerning this ma	tter, please call:	
-Robert Roundtree		at (5	343-8572
(Name of Conta	ict Person)	(Area Code)	(Daytime Telephone Number)
	or the following amou a bank located in the		ocessed 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	☐S180.00 Filing F and Certified Copy	ces DS 85.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAILE	NG ADDRESS:
New Filing Section			ng Section
Division of Corporat	ions		of Corporations
Clifton Building 2661 Executive Cent	er Circle	P. O. Bo Tallahas	x 6327 see, FL 32314
Con interesting Celli	T. C.11616	i ananas	reet to be beautiful and the b

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.

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

(Enter Name of Other Business Entity)
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 incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
April 7, 2016 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LXZ Technologies.LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: 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.)
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.
en e

Signed	this day of		_ 20	
	re of Authorized Representativ) ⁻¹	
Signatu	re of Authorized Representative:	29	18	
Printed	Name; Lenzer Burton		Title: Member	_
			See below for required signature(s)]	
Signatu	re: <u>284</u>			
Printed	Name: Lenzer/Burtón		Title: President	
Signatur	re:			
Printed	Name:		_ Title:	<u></u>
Signatu	re·			
Printed	Name:		_Title:	
Printed	Name:		_ Title:	_
C:				
Signatui Printed	re: Name:			_
Signatu	re:		Title:	
Timed	Name.			
	da Corporation:		7/2-	
	re of Chairman, Vice Chairman, D tors or Officers have not been selec			
	<mark>da General Partnership or Limit</mark> re of one General Partner.	<u>ted Liabilit</u>	y Partnership:	
If Flori	<u>da Limited Partnership</u> or Lim <u>it</u>	ted Liahilit	v Limited Partnership	
	res of ALL General Partners.		y Elimeter at the control of the con	
Allotha	Apr.			
All other Signatur	re of an authorized person.			
Fees:				
	Articles of Conversion:		\$25.00	
	Fees for Florida Articles of Organ	nization:	\$125.00	:
	Certified Copy:		\$30.00 (Optional)	;
	Certificate of Status:		\$5.00 (Optional)	
				· :.
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ARTICLE I - Name:		
The name of the Limited Liability Compan	ny is:	
LXZ Technologies,LLC		
(Must contain the words "Limited I.	liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
7648 Topiary Avenue	7648 Topiary Avenue	
BOYNTON BEACH, FL 33437	BOYNTON BEACH, FL 33	437
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)		
The name and the Florida street address of	the registered agent are:	
Lenzer Burton		
1	Name	
7648 Topiary Avenue		
	(P.O. Box NOT acceptable)	
BOYNTON BEACH	FL 33437	
City	Zip	
Having been named as registered agent of liability company at the place designal registered agent and agree to act in this constantes relating to the proper and compacted the obligations of my position of the proper and compacted the obligations of the proper and compacted th	ted in this certificate, I hereby accapacity. I further agree to compolete performance of my duties, a	cept the appointment as ly with the provisions of all nd I am familiar with and
22h		
Registeréd Agent's	Signature (REQUIRED)	√ - 4
		17
(CON	TINUED)	1007-130

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		_	17-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Lenzer Burton	
	7648 Topiary Avenue	
	BOYNTON BEACH FL 33437	
	 	
(1 la violta alemant 16 managana)	••	
(Use attachment if necessary)		<u>-</u>
		1
OLD MODELL CO.	2	~-
CLE V: Other provisions, if any.		
	<u></u>	
		<u> </u>
	——————————————————————————————————————	
	>	
<u>REQUIRED</u> SIGNATURE:		
22	1	
Signature of a member or	an authorized representative of a member	
This document is executed in accordance	with section 605,0203 (1) (b). Florida Statutes, I am aware that	
any talse information submitted in a docu- as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree felor	ìÀ
as provided for in \$.517.150, 1.5,		
Lenzer Burton		

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)