L17000228854

(Req	uestor's Name)	
(Addı	ress)	·
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(City/	/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Casaial Instructions to Fi		
Special Instructions to Fi	lling Officer:	
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W17-81	6673	

Office Use Only

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T. BURCH NOV 6 2017

COVER LETTER

TO: New Filing S Division of C				
SUBJECT:		Services LL aulting Florida Limited Con		
		_	d fees are submitted to convecordance with s. 605.1045,	
Please return all corr	espondence concerning	g this matter to:		1
James 1	Contact Person)			
	(Firm/Company)	es LLC		,
6101 An.	se Drive (Address)			
Surasota 1	L 34238 City, State and Zip Code)			
iamestee	a Summit le used for future annual re	r. net		
For further informati	on concerning this ma	tter, please call:		1
James L (Name of Conta	ect Person)	at (941) L' (Area Code) (Day	rtime Telephone Number)) 1
	for the following amou a bank located in the		sed by this office must be pa	ıyable 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 Fees and Certified Copy	\$\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES New Filing Section	S:	MAILING A New Filing S		,

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 30, 2017

JAMES LEE 6101 ANISE DRIVE SARASOTA, FL 34238

SUBJECT: SUMMIT WIRELESS SERVICES LLC

Ref. Number: W17000086673

We have received your document for SUMMIT WIRELESS SERVICES LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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: 517A00021886

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following

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ATT AHASSEE, PLORIDA

"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:

Summit Wiseless Securices LLC

(Enter Name of Other Business Entity) M12-5762

2. The "Other Business Entity" is a later Limited Limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Deleuace (Enter state, or if a non-U.S. entity, the name of the country)

on 10/15/2012

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Summit Wiseless Securices LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date:

5. The plan of conversion has been approved in accordance with all applicable statutes.

the date this document is filed by the Florida Department of State.)

document's effective date on the Department of State's records.

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.

(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this day of	20 <u>17</u>
Signature of Authorized Representative of Limite	d Liability Company:
Signature of Authorized Representative: Printed Name:	Title: Managing Member
Signature(s) on behalf of Other Business Entity: [S	ce below for required signature(s)]
Signature: Printed Name: Sames Lee	Title: Managing Member
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	
Signature:Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty <u>Limited Partnership:</u>
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 Con	npany is:
Summit Wice \ (Must contain the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
	and Education, Company, Education of Education
ARTICLE II - Address:	
The mailing address and street address	of the principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
4678 Ashton Rd	GIOL Anise Drive
ARTICLE III - Registered Agent, Re	egistered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Re(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another)
ARTICLE III - Registered Agent, Response to the Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another) ss of the registered agent are:
ARTICLE III - Registered Agent, Response to the Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another) ss of the registered agent are:
ARTICLE III - Registered Agent, Recommendation of the Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street addres	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another)
ARTICLE III - Registered Agent, Re(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street addres	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another) ss of the registered agent are: Lee 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)

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Melissa Lee
	GIOI Anise Dr
	Sarabole, FL 34238
AMBR	James Mohan
	5117 Laylan Dr
	Venice FL 311243
	<u> </u>
	
(Use attachment if necessary)	
(Ose attachment if necessary)	
LE V: Other provisions, if any.	ORIDA DE
REQUIRED SIGNATURE:	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am awaiment to the Department of State constitutes a third degree
Jam	pped or printed name of signee
Tv	ped or printed name of signee

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

ARTICLE IV-