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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date:	12/22/2017		
		T. 120160000072	will b
Name:	I2P, LLC		
Document #:			
Order #:	10767643		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing:	Certified: Plain: COGS:		
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$	150.00]

Thank you!

11 UCE 22 FH 4:11.

COVER LETTER

TO: New Filing Division of	Section Corporations				
SUBJECT: 12P, LL	•				
Seboner.		sulting Florida Lin	nited Con	npany)	
				d fees are submitted to convecordance with s. 605.1045,	
Please return all con	rrespondence concernin	g this matter to	:		
Ford JH Turrell					
	(Contact Person)				
Warner Norcross & Juc	id, LLP				
	(Firm/Company)				
111 Lyon Street, Suite	900				
	(Address)				
Grand Rapids, Michiga	ın 49503				
	(City, State and Zip Code)				
flurrell@wnj.com	(****), 0.230 8.00 3.16 4.024,				
	be used for future annual re	port notifications			
-	tion concerning this me				
Ford Turrell		_at (⁶¹⁶	752-7	2768	
(Name of Con	fact Person)	(Area Coo	le) (Day	time Telephone Number)	
	for the following amount a bank located in the		proces:	sed by this office must be pr	iyable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐ \$155,00 Filing Fees and Certificate of Status	□\$180.00 Fili and Certified C		□S185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRE	SS:	MAI	LING A	ADDRESS:	
New Filing Section			Filing S		
Division of Corpora	utions	Divis	ion of (Corporations	
Clifton Building			Box 63		~ ~
2661 Executive Cer	iter Circle	Talla	hassec	FI 32314	-

INHS11 (7/17)

Tallahassec, FL 32301

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 "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: 12P, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(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)
November 13, 2014 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:
I2P, LI.C
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: January 1, 2018
(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.

116cc22 FH 4:0.

Signed thi	s day of December	20 <u>17</u>
	of Authorized Representative of Limi	
Signature	of Authorized Representative: Max	the Wet
Printed Na	me: Maithew C. Winter	Title: Manager
C1:	(s) on behalf of Other Business Entity: Mattle Chil	·
Printed No	me: Matthew C. Winter	Title: Manager
Signature:	me:	Tid
FIIII.GU INA	ine	Title:
Signature:		
Printed Na	me:	Title:
Signature:		_
Printed Na	mc:	Title:
Printed Na	me:	Title:
Signature:	me:	Title
Printed (Vi	me:	rate:
	Corporation:	
	of Chairman, Vice Chairman, Director, or is or Officers have not been selected, an In	
II DITECTO	s of Officers have not been selected, all th	corporato: musi sign.
	General Partnership or Limited Liabili	ty Partnership:
Signature	of one General Partner.	
	Limited Partnership or Limited Liabili of ALL General Partners.	tv Limited Partnership;
All others Signature	<u>:</u> of an authorized person.	
Fees:		
Αı	ticles of Conversion:	\$25.00
	es for Florida Articles of Organization:	\$125.00
	ertified Copy:	\$30.00 (Optional)
C	ertificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

12P, LLC			
(Must contain	the words "Limited Liabi	fity Company, "L.L.C.," or "L	LC.")
ARTICLE II - Address:			
	rect address of the	principal office of the l	Limited Liability Company is:
Principal Office Address:		Mailing Address:	
T2P LT.C		P.O. Box 492	
4501 Tamiami North, Suite 214		Alpena, Michigan 407	07
Naples, Florida 34103			
Lynx Pro	oducts Corp Nar	ยะ	
2424 Ma	inatec Avenue West, Si	uite 203	
Florid	a street address (P.	O. Box <u>NOT</u> acceptab	le)
Bradente	on	FL 34205	
	City	Zip	
liability company at the registered agent and agree statutes relating to the paccept the obligations	ne place designated receive to act in this cape reper and complete of my position as r	in this certificate, I her acity. I further agree to e performance of my due egistered agent as prov	ocess for the above stated limited eby accept the appointment as comply with the provisions of all ties, and I am familiar with and vided for in Chapter 605, F.S
	L.C.C.	Mc/ SEL-TREAD	
Reg	gistered Agent's Si	gnature (REQUIRED)	

(CONTINUED)

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

"AMBR" = Authorized Member	
"MGR" == Manager MGR	Matthew C. Winter
NOR	4501 US 23 North
	Alpena, Michigan 49707
	Atjena, wiengan 47707
(Use attachment if necessary)	
(Use attachment if necessary) LEV: Other provisions, if any.	
LEV: Other provisions, if any.	
LEV: Other provisions, if any.	7:4
LEV: Other provisions, if any. REQUIRED SIGNATURE: Matt L	Diff
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware to ment to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu	with section 605.0203 (1) (b), Florida Statutes. I am aware ti
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. Matthew C. Winter, Manager	with section 605.0203 (1) (b), Florida Statutes, I am aware to ment to the Department of State constitutes a third degree felories.
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. Matthew C. Winter, Manager	with section 605.0203 (1) (b), Florida Statutes, I am aware to ment to the Department of State constitutes a third degree feloped or printed name of signee
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.S17.155, F.S. Matthew C. Winter, Manager Ty	with section 605.0203 (1) (b), Florida Statutes, I am aware to ment to the Department of State constitutes a third degree feloped or printed name of signee Filing Fees
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Matthew C. Winter, Manager Ty \$125.00 Filing Fee for Articles of	with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree feloped or printed name of signee Filing Fees of Organization and Designation of Registered & S. 5.00 Certificate of Status (Option
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.\$17.155, F.S. Matthew C. Winter, Manager Ty	with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree feloped or printed name of signee Filing Fees of Organization and Designation of Registered