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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	ıtv



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COVER LETTER

TO:	New Filing So Division of C					
SUBJ	ECT: Installatro	on LLC				
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			sulting Florida Lir	nited Cor	mpany)	
The en	nclosed Articles ess Entity" into	s of Conversion, Artic a "Florida Limited L	eles of Organiza iability Compa	ation, an ny" in a	nd fees are submitted to con accordance with s. 605.1045	vert an "Other , F.S.
Please	return all corre	espondence concernin	g this matter to):		
Robert	C. May, Esquire					
		(Contact Person)		_		
The La	aw Firm of May &	May, PC				
		(Firm/Company)	-	_		
4330 (Carlisle Pike					
		(Address)	<u>. </u>	_		
Camp	Hill, PA 17 011					
	((City, State and Zip Code)		_		
	pstier@installa	tron.com				
E-n	nail Address: (to b	e used for future annual re	port notifications	-		
For fu	rther information	on concerning this ma	tter, please cal	l:		
Robert	C. May, Esquire		at (717	612-0	0102 x21	
	(Name of Conta	et Person)	(Area Coo	le) (Day	0102 x21 ytime Telephone Number)	
		or the following amou a bank located in the		proces	sed by this office must be p	ayable in US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles mization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filinand Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
New I Divisi Clifto 2661 I	ET ADDRESS Filing Section on of Corporati n Building Executive Center lassee, FL 3230	ions er Circle	New Divis P. O.	Filing S ion of C Box 63	Corporations	

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: Installation 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)
on June 21, 2012 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Installatron 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.

Signed this day of December	
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:	
Printed Name: Phillip Stier	Title: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature PHia D	
Signature: Mur Description Printed Name: Phillip Stier	Title: Manager
Trinea raine.	Title, manager
Signature:	
Printed Name:	Title:
Signature:	and
Printed Name:	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	tv Partnershin
Signature of one General Partner.	ty tartife sing.
-	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion;	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - The name of th	e Limited Liability Compa	nv ic.
The name of m	e Emmed Elability Compa	ny 15.
Installatron LLC		
	(Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II -	- Address:	
		the principal office of the Limited Liability Company is:
Principal Offi	ce Address:	Mailing Address:
8753 Melosia Stre	eet Apt 8210	8753 Melosia Street Apt 8210
Fort Myers, FL 3.	3912	Fort Myers, FL 33912
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Regi ity Company cannot serve as its ow h an active Florida registration.) the Florida street address o	Stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Regi ity Company cannot serve as its ow h an active Florida registration.)	Fort Myers, FL 33912 stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another f the registered agent are:
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Regi ity Company cannot serve as its ow h an active Florida registration.) the Florida street address o	Stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Regi ity Company cannot serve as its ow h an active Florida registration.) the Florida street address o	Fort Myers, FL 33912 stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another f the registered agent are: Name
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Regi ity Company cannot serve as its ow h an active Florida registration.) the Florida street address o Phillip Stier 8753 Melosia Street Apt 8	Fort Myers, FL 33912 stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another f the registered agent are: Name
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Regi ity Company cannot serve as its ow h an active Florida registration.) the Florida street address o Phillip Stier 8753 Melosia Street Apt 8	Fort Myers, FL 33912 stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another f the registered agent are: 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)

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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	DIAM OF				
MGR	Phillip Stier				
	8753 Melosia Street Apt 8210 Fort Myers, FL 33912	-			
	1 of Wyels, 1 G 33712	-			
		-			
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	<u></u>				
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(Use attachment if necessary)	•••	(J)			
RTICLE V: Other provisions, if any.			-		
REQUIRED SIGNATURE:			_		
Pille So		_			
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am awarement to the Department of State constitutes a third degree fe	that lony			
Phillip Stier					
	ped 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)