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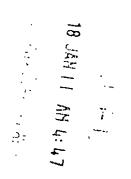
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## Articles of Conversion For "Other Business Entity" Into

#### 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.

| ł. ·  | The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  MC TOOLS & MACHINERY CORP   |
|-------|--|
|       | (Enter Name of Other Business Entity)  |
| 2. 1  | CORPORATION  [Consider Business Entity" is a [Consider Section of the Consider |
|       | (Bater entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.,  |
| Firs  | t organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)  |
|       | (Enter state, or if a non-U.S. entity, the name of the country)  |
| on    | 07/17/2007   |
| (//   | (date of organization, formation or incorporation)   |
| 3. 1  | The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:   |
|       | MC TOOLS & MACHINERY, LLC.   |
|       | (Enter Name of Florida Limited Liability Company)  |
| 4. [: | f not effective on the date of filing, enter the effective date:   |
| (The  | e effective date: Caunot be prior to date of receipt or filed date nor more than 90 calendar days after date this document is filed by the Florida Department of State.)   |
|       | If the date inserted in this block does not need the applicable statutory filling requirements, this date will not be listed as the ment's effective date on the Department of State's records.  |
| 5. Ti | he plan of conversion has been approved in accordance with all applicable statutes.  |
|       | ne "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to  |

| Signed this 2  | day of NOVEMBER  | 20 <u>17</u>                     |                     |
|--|--|----------------------------------|---------------------|
| Signature of Author  | rized Representative of Lin  | alted Linbiller Con              | прапу:              |
| Signature of Authori. Printed Name: ANIBA                            | zed Representative:  | MA Title: AMBR                   |                     |
| Signature(s) on beha   | if of Other Business Entity:   | [See below for req               | uired signature(s)] |
| Signature:   | Kello  |                                  |                     |
| Printed Name: 10521  | M. CASTILLO  | Title: PRESIDEN                  | 7                   |
| D1   |  |                                  |                     |
| Printed Name:  |  | Title:                           |                     |
|  |  |                                  |                     |
| Signature:   |  | <b>7</b>                         |                     |
| Printed Name:  |  | Title:                           |                     |
| Signature:   |  |                                  |                     |
| Printed Name:  |  | Title:                           |                     |
|  |  |                                  |                     |
| Signature:   |  | T'Al a.                          | <del> </del>        |
| Printed Name:  |  | Title:                           |                     |
| Signature:   | ····   |                                  |                     |
| Printed Name:  |  | Title:                           |                     |
| If Florida Cornoration Signature of Chairman If Directors or Officer | DB:<br>a, Vice Chairman, Director, or<br>s have not been selected, an In | Officer.<br>ncorporator must sig | n.                  |
| If Florida General Pr<br>Signature of one Gene                       | artnershin or Limited Liabi<br>rai Parmer.                               | ity Partnership:                 |                     |
| If Florida Limited Pr<br>Signatures of <u>ALL</u> Ge                 | artnership or Limited Liabil<br>meral Parmers.                           | ity Limited Partner              | ahin:               |
| All others:<br>Signature of an author                                | ized person.   |                                  |                     |
| Fees:  |  |                                  |                     |
| Articles of Co   | inversion:   | <b>\$</b> 25.00                  |                     |
| Fees for Florie  | da Articles of Organization:   |                                  |                     |
| Centified Copy   |  | \$30.00 (Optional                | )                   |
| Certificate of   | Status:  | \$5.00 (Optional)                |                     |

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

|   | LS & MACHINERY, LLC  |
|---|--|
| (Must contain the words "Lim  | ited Lisbility Company, "L.L.C.," or "LLC.")   |
| ARTICLE II - Address:<br>The mailing address and street address   | of the principal office of the Limited Liability Company is:   |
| Principal Office Address:   | Mailing Address:   |
| 74C0 W 29 LANE  | 7400 W 29 LANE   |
| HIALBAH, PL 33018   | HIALEAH, PL 33018  |
| business entity with an active Florida registration.) The name and the Florida street address   |  |
| AVIBAL BRAES  | Name   |
|   | · · · · · · · · · · · · · · · · · · ·  |
|   | 7400 W 29 LANE<br>ress (P.O. Box <u>NOT</u> acceptable)  |
| CAPE CORA   |  |
| City  |  |
| HAININ BOOK BANGA OF PORTERNA OF  |  |
| liability company at the place designed registered agent and agree to act in the statutes relating to the proper and accept the obligations of my positions.  Registered Agents | omplete performance of my duties, and I am familiar with and ion as regionered agent us provided for in Chapter 605, F.S   |
| liability company at the place designed registered agent and agree to act in the statutes relating to the proper and accept the obligations of my positions.  Registered Agents | gnated in this certificate, I hereby accept the appointment as his capacity. I further agree to comply with the provisions of all omplete performance of my duties, and I am familiar with and ion as regionered agent as provided for in Chapter 605, F.S |

| Title:   | Name and Address:   |
|--|---|
| "AMBR" = Authorized Member "MGR" = Manager   |   |
| AMBR/ MGR  | ANIBAL ERNESTO ROSALES LEZAMA   |
|  | 7400 W 29 LANE  |
|  | HIALEAH, FL 33018   |
| AMBR   | JOSE M CASTILLO   |
|  | 7400 W 29 LANE  |
|  | HIALEAH, FL 33018   |
| 4  |   |
|  |   |
|  |   |
|  |   |
|  |   |
| (Use attachment if necessary)  |   |
| LE V; Other provisions, if any.  |   |
| LE V: Other provisions, if any.  REOUIRED SIGNATURE:   | 77  |
| REQUIRED SIGNATURE:  |   |
| Signature of a member or   | an authorized representative of a member with section 605.0203 (1) (b), Plorida Statutes. I am aware to many to the Department of State constitutes a third degree feld   |
| Signature of a member or This document is executed in accordance only fake information submitted in a document provided for in a.817 155, F.S.   | with section 605.0203 (1) (b), Plorida Statutes. I am aware the mant to the Department of State constitutes a third degree felo   |
| Signature of a member or This document is executed in accordance only faise information-submitted in a document provided for in a.817 155, F.S.  AN  | with acction 603,0203 (1) (b). Playida Statutea, Cam assert th  |
| Signature of a member or This document is executed in accordance any false information submitted in a document provided for in a.817 155, F.S.  AN   | with section 605.0203 (1) (b), Plorida Statutes, I am aware the mant to the Department of State constitutes a third degree feld IBAL ERNESTO ROSALES LEZAMA ped or printed name of signee Filing Rees                                 |
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| Signature of a member or This document is executed in accordance any faise information submitted in a document provided for in a.817 155, F.S.  AN Ty  \$125.00 Filing Fee for Articles of | with section 605.0203 (1) (b), Plotida Statutes. I am aware the main to the Department of State constitutes a third degree fold IBAL ERNESTO ROSALES LEZAMA ped or printed name of signee    Cling Rees   Comparison of Registered A  |
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| Signature of a member or This document is executed in accordance any faise information submitted in a document provided for in a.817 155, F.S.  AN Ty  \$125.00 Filing Fee for Articles of | with section 605.0203 (1) (b), Plotida Statutes, I am aware the mint to the Department of State constitutes a third degree fold IBAL ERNESTO ROSALES LEZAMA ped or printed name of signee    Riting Rees   Comparison of Registered A |