618000043073

(Requestor's Name)		
(Address)		
(Add	iress)	
(City	r/State/Zip/Phone #)	
PICK-UP	MAIL MAIL	
(Bus	siness Entity Name)	
(Doc	cument Number)	
Certified Copies	Certificates of Status	
Special Instructions to F		
	W8/10/19	





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T. BURCH FEB 2 0 2018

COVER LETTER

Division of C	orporations				
SUBJECT: Composit	e Automation, LLC				
50DJECT	(Name of Res	sulting Florida Limite	d Con	npany)	
				d fees are submitted to convert an "Ot ecordance with s. 605.1045, F.S.	her
Please return all corre	espondence concerning	g this matter to:			
John Melilli					
	(Contact Person)				
Composite Automation,	LLC				
	(Firm/Company)				
1121 Cape Coral Parkwa	y West				
	(Address)				
Cape Coral, Florida 339	14				
	City, State and Zip Code)				
john@compositeautoma	tion.com				
E-mail Address: (to b	e used for future annual re	port notifications)			
For further informati	on concerning this ma	tter, please call:			
Colleen Melilli		_at (<u>610</u>)	337-9	7794	
(Name of Conta	ect Person)	(Area Code)	(Day	time Telephone Number)	
	or the following amou a bank located in the		ocess	sed by this office must be payable in U	JS
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES New Filing Section Division of Corporat		New Fil	ing S	ADDRESS: ection Corporations	

P. O. Box 6327

Tallahassee, FL 32314

INHS11 (7/17)

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

TO: New Filing Section



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 31, 2018

JOHN MELILLI 1121 CAPE CORAL PWKY WEST CAPE CORAL, FL 33914

SUBJECT: COMPOSITE AUTOMATION, LLC

Ref. Number: W18000010119

We have received your document for COMPOSITE AUTOMATION, 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):

The Certificate of Conversion must be signed by an authorized person.

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 a general partner. If the converting entity is a limited partnership or limited liability limited 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: 018A00002063

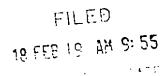
Articles of Conversion

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: Composite Automation, 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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
August 8, 2016 on .
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Composite Automation, 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.)
<u>Note:</u> 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 January	<u> </u>
	of Authorized Representative of Lin	
Signature of Printed Na	of Authorized Representative:	Title: President
Signature((s) on behalf of Other Rusiness Entity:	[See below for required signature(s)]
Signature: Printed Na	JOHN MELILLI	Title: PRESIDENT/OWNER
,		Title:
Signature: Printed Na	me:	Title:
Signature: Printed Na	me:	Title:
Signature: Printed Na	me:	Title:
Signature:		Title:
If Florida Signature of If Director	Corporation: of Chairman, Vice Chairman, Director, of Son Officers have not been selected, an I General Partnership or Limited Liabi	or Officer. Incorporator must sign.
Signature o	of one General Partner.	
	Limited Partnership or Limited Liabi of <u>ALL</u> General Partners.	dity Limited Partnership:
All others Signature of	i of an authorized person.	
Fees:		
Fee Ce	ticles of Conversion: es for Florida Articles of Organization: rtified Copy: rtificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

pany, "L.L.C.," or "LLC.")		
al office of the Limited Liability Company is:		
ailing Address:		
1121 Cape Coral Parkway West		
Cape Coral, FL 33914		
ered agent are:		
ered agent are: NOT acceptable)		
NOT acceptable)		
2		

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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	John Melilli
	1121 Cape Coral Parkway West
	Cape Coral, FL 33914
AMBR	Colleen Melilli
	1121 Cape Coral Parkway West
	Cape Coral, FL 33914
(Use attachment if necessary)	
	in the second se
DTICLE V Od 12 22 12 12 12 1	1× 1× 1× 1× 1× 1× 1× 1× 1× 1× 1× 1× 1× 1
ARTICLE V: Other provisions, if any.	
IN number: 81- 3479003	
REQUIRED SIGNATURE:	1 All
This document is executed in acyordance	an authorized representative of a member e with section 605 0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony
John Melilli	
Tv	vped or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)