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(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: New Filing Se Division of C				
SUBJECT: Intelliger	nce Community Support I	nternational, L.L.C.		
·	(Name of Res	sulting Florida Limite	ed Company)	
		_	on, and fees are submitted to convert an "Oth" in accordance with s. 605.1045, F.S.	er
Please return all corre	espondence concerning	g this matter to:		
William Lewis				
	(Contact Person)			
IntelligenceCommunity	SupportInternationalLLC			
	(Firm/Company)			
713Emma Street, UNI	Т 3			
	(Address)			
Key West,FL 33040				
((City, State and Zip Code)			
Bill@BKLewis.com				
E-mail Address: (to b	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
William Lewis		_at ()	, 868- 4 846	
(Name of Conta	ct Person)	(Area Code)	(Daytime Telephone Number)	
	or the following amou a bank located in the	•	rocessed by this office must be payable in US	5
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing F and Certified Copy		
STREET ADDRESS	S:	MAILI	NG ADDRESS:	
New Filing Section			ling Section	
Division of Corporati	ions		n of Corporations	
Clifton Building		P. O. Bo	ox 6327	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

FILED

18 MAR - I AH 9: 00

SECRETARY OF STATE IALLAHASSEE, FLORID:

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: Intelligence Community Support International, L.L.C.
(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)
January,25 2006
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:
Intelligence Community Support International, L.L.C.
(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 1st	day of March	20_18
G	al at 175° and the	2 11:102 C
Signature of Au	thorized Representative of Lim	ited Liability Company:
Signature of Aut	horized Representative:	Night
Printed Name: Wi	lliam H. Lewis	Title: President
Signatura(s) on l	pehalf of Other Business Entity:	[See below for required signature(s)]
Signature:		
Signature:	70.	District Control
Printed Name: VI	liam H. Lewis	Title: President
Signature		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Drinted Names		Title:
rinted Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
If Florida Corno		
If Florida Corpo	ration: rman, Vice Chairman, Director, or	Officer
	ficers have not been selected, an In	
II Bilectors of Or	neers have not been selected, an in	corporator must sign.
<u>If Florida Gener</u>	al Partnership or Limited Liabili	ity Partnership:
Signature of one (General Partner.	
	ed Partnership or Limited Liabili	ty Limited Partnership:
Signatures of AL	L General Partners.	
All others:		
Signature of an au	thorized person.	
J	•	
Fees:		
,		***
	f Conversion:	\$25.00
	Florida Articles of Organization:	\$125.00
Certified	1 4	\$30.00 (Optional)
Certificate	e of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:
Intelligence Community Support International, L.L. (Must contain the words "Limited Liabi	
ARTICLE II - Address: The mailing address and street address of the part of th	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
713 Emma Street	713 Emma Street
Unit 3	UNIT 3
Key West,FL 33040	Key West,FL 33040
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the William H. Lewis	registered agent are:
713 Emma Street, UNIT 3	
Florida street address (P.	O. Box NOT acceptable)
Key West	FL 33040
City	Zip
liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as acity. I further agree to comply with the provisions of all a performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S

Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	William H. Lewis	
	713 Emma Street, UNIT 3	
	Key West, FL 33040	
(Use attachment if necessary)	()	
	<u> </u>	
LE V: Other provisions, if any.		

REQUIRED SIGNATURE:

Signature of member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

William H. Lewis

ARTICLE IV-

Typed 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)