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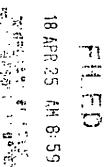
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	_





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04/25/18--01007--001 **540.00



APR 3 0 7P***
T SCHROEDEF

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Gasifier Manufacturing.	LLC
(Name of Re	sulting Florida Limited Company)
	cles of Organization, and fees are submitted to convert an "Other liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	ng this matter to:
JOHN T. SEFTON	
(Contact Person)	
SHEFTALL & ASSOCIATES, P.A.	
(Firm/Company)	
I INDEPENDENT DR., STE 3201	
(Address)	
JACKSONVILLE. FL 32202	
(City, State and Zip Code)	
LDavis@ngwic.com	
E-mail Address: (to be used for future annual re	eport notifications)
For further information concerning this ma	atter, please call:
John T. Sefton	at (⁹⁰⁴) ⁶⁴⁷⁻²²⁹⁷
(Name of Contact Person)	at (904) 647-2297 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amordollars and drawn on a bank located in the	unt: (All checks processed by this office must be payable in US United States)
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing Fees and Certified Copy □\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

32301

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.

	mmediately prior to the filing of the Articles of Conversion is:
·	Other Business Entity)
2. The "Other Business Entity is a	LIABILITY COMPANY
	v type. Example: corporation, limited partnership, partnership, common law or business trust, etc.)
First organized, formed or incorporated under on APRIL 22, 2013	the laws of DELAWARE (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability	Company as set forth in the attached Articles of Organization
GASIFIER MANUFACTURING, LLC	
(Enter Name of Florida L	imited Liability Company)
4. If not effective on the date of filing, enter t	
after the date this document is filed by the the effective date listed in the attached Arti	ate of receipt or filed date nor more than 90 calendar days Florida Department of State; AND 2) must be the same as cles of Organization, if an effective date is listed therein.) ne applicable statutory filing requirements, this date will not be listed as the
after the date this document is filed by the the effective date listed in the attached Arti Note: If the date inserted in this block does not meet the	ate of receipt or filed date nor more than 90 calendar days Florida Department of State; AND 2) must be the same as cles of Organization, if an effective date is listed therein.) he applicable statutory filing requirements, this date will not be listed as the records.
after the date this document is filed by the the effective date listed in the attached Arti Note: If the date inserted in this block does not meet the document's effective date on the Department of State's 5. The plan of conversion has been approved	ate of receipt or filed date nor more than 90 calendar days Florida Department of State; AND 2) must be the same as cles of Organization, if an effective date is listed therein.) he applicable statutory filing requirements, this date will not be listed as the records. In accordance with all applicable statutes.

Signed this	day of MAY	20_17	
Signature of Au	thorized Representative of Li	mited Liability Company:	
	norized Representative:	F. 11 (12m	
Signature of Auth	horized Representative:		
Printed Name: <u>WI</u>	LLIAM A. MCARTHUR	Title: MANAGER	
Signature(s) on b	ochalf of Other Business Entity	: [See below for required sign	nature(s)]
	aillion		
Signature:	COCCO	THE ALASTA CIPIN	
Printed Name: WI	LLIAM A. MCARTHUR	Title: MANAGER	
Sionature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:		77.1	
Printed Name:		little:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
tem. Ja. Z			
If Florida Corpo	<u>ration:</u> rman, Vice Chairman, Director,	or Officer	
	licers have not been selected, an		
	meets mive not been selected, an	meorporator mate organ	
<u>If Florida Gener</u>	al Partnership or Limited Liab	oility Partnership:	
Signature of one (General Partner.		
<u>If Florida Limite</u>	ed Partnership or Limited Liah	oility Limited Partnership:	
Signatures of AL	L General Partners.		
All others:			
Signature of an au	ithorized person.		
	•		
<u>Fees:</u>			
	of Conversion:	\$25.00	
	Florida Articles of Organization		~
Certified		\$30.00 (Optional)	
Certificat	e of Status:	\$5.00 (Optional)	,

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CASICIOD MAI	NUIEACTUDING 11C				
GASIFIER MAI	NUFACTURING, LLC (Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")			
ARTICLE II		e principal office of the Limited	d 1 iokilisu	Come	
ine maning a	duress and street address of th	e principal office of the Ellinter	a Liability	Comp	Jany 18
Principal Off	ice Address:	Mailing Address:			
7254 OLD PLA	NK ROAD	569 EDGEWOOD AVENUE			
IACKSONVILI		JACKSONVILLE, FL 32205		_	
anness entry w					
	ith an active Florida registration.) the Florida street address of t	he registered agent are:	7 ¹⁸	18 AP	· · · · ·
	the Florida street address of t		24 2 - 24 2 - 25 2 - 25 2 - 25 2 - 25	18 APR 2	
	the Florida street address of t	he registered agent are:	18	APR 25	
	the Florida street address of t	ame	24 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	APR	
	the Florida street address of t RAX CO. N 50 N. LAURA ST., STE 330	ame		APR 25 AH 8:	
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	the Florida street address of t RAX CO. N 50 N. LAURA ST., STE 330 Florida street address (ame 00 P.O. Box <u>NOT</u> acceptable)	2000年代の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の	APR 25 AH 8:	

Christopher J. Thanner, Vice President

A	RT	IC.	L.F.	IV-
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The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	WILLIAM A. MCARTHUR	
	569 EDGEWOOD AVENUE	
	JACKSONVILLE, FL 32205	
	THE STATE OF THE S	
	<u></u>	
	 	_
		
		
		Mark State
		- 3 ; 6
		
(Use attachment if necessary)		8: 59 8: 59
CLE V: Effective date, if other than	the date of filing:	OPTIONAL
effective date is listed, the date mu o or 90 calendar days after the dat		
f the date inserted in this block does not med nt's effective date on the Department of Stat CLE VI: Other provisions, if any.		
f the date inserted in this block does not mee nt's effective date on the Department of Stat		
f the date inserted in this block does not mee nt's effective date on the Department of Stat		

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 A. McARTHUR

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)