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(Re	questor's Name)	
,	,	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Lo	cument Number)	
Certified Copies	Certificates	of Status
,	_	
Special Instructions to	Filing Officer:	
S.		

Office Use Only



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AUG 1 4 2018 T SCHROEDER

COVER LETTER

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TO: New Filing Division of	Section Corporations		
SUBJECT: PERFO	RMANCE MACHINE SYS	TEMS INC	
30031,61	(Name of Res	sulting Florida Limited	Company)
			, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all con	respondence concernin	g this matter to:	
CAROLYN STASH			
	(Contact Person)		
PERFORMANCE MA	CHINE SYSTEMS LLC		
	(Firm/Company)		
10 FAIRWAY DRIVE	, SUITE 111		
	(Address)	· · ·	
DEERFIELD BEACH	, FL 33441		
	(City, State and Zip Code)		
carolyn@atlastrax.co			
E-mail Address: (to	be used for future annual re	port notifications)	
For further informa	tion concerning this ma	tter, please call:	
CAROLYN STASH		_at ()	165-3743
(Name of Con	tact Person)		(Daytime Telephone Number)
	for the following amount a bank located in the		cessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fe and Certified Copy	Certificate of Status
STREET ADDRE	SS:	MAILIN	G ADDRESS:
New Filing Section			ng Section
Division of Corpora Clifton Building	ations	Division P. O. Box	of Corporations
2661 Executive Cer	nter Circle		ee, FL 32314

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

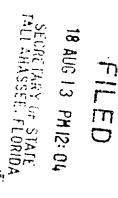
Florida Limited Liability Company

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION (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 JULY 25, 2018 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PERFORMANCE MACHINE SYSTEMS LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
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 3 day of AUGUST	20_18
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Carolyn STASH	Title: MANAGING MEMBER
Signature(s) on behalf of Other Business Entity:	• •
Signatur Carolyn Stash Printed Name: CAROLYN STASH	Title: PRESIDENT
Signature:Printed Name:	
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabili	corporator must sign.
Signature of one General Partner. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

18 AUG 13 PM 12: OL SECKE FARY OF STATE TALL AHASSEF FI COME

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Li	ne: mited Liability Company	is:	
	ACHINE SYSTEMS LLC	oility Company, "L.L.C.," or "Ll.C.")	
ARTICLE II - Ad	dress:		
		principal office of the Limite	ed Liability Company is:
Principal Office A	ddress:	Mailing Address:	
10 FAIRWAY DRIVI	E, SUITE 111	10 FAIRWAY DRIVE, SUI	TE 111
DEERFIELD BEACH	I, FL 33441	DEERFIELD BEACH, FL 3	3441
(The Limited Liability Cobusiness entity with an a		red Office, & Registered Ag gistered Agent. You must designate an	
The name and the i	iona siteet address of th	e registered agent are.	3€ 36
	CAROLYN STASH		18 AUG
	Na	me	UG 13
	10 FAIRWAY DRIVE, SUIT	E 111	~n~<
	Florida street address (P	O. Box NOT acceptable)	PHIZ: OF STATE
	DEERFIELD BEACH,	FL 33441	
	City	Zip	

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)

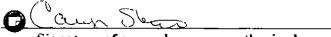
ARTICLE IV	A	RT	ICI	LE	IV
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The name and address of each person authorized to manage and control the Limited Liability Company:

Name and Address:
CANNI VALCTACII
CAROLYN STASH
10 FAIRWAY DRIVE, SUITE 111
DEERFIELD BEACH, FL 33441

— ——
AH.
SSA 3
<u> </u>
$\frac{\pi}{2}$
P M 12: UF 317 E. FLOI
40. A
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REQUIRED SIGNATURE:



Signature of a 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.

CAROLYN STASH

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)