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

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## **COVER LETTER**

TO: New Filing S Division of C				
SUBJECT: Specialty	y Engineering Services	& Solutions, LLC		
		sulting Florida Limited Co	mpany)	<del></del>
The enclosed Article Business Entity" into	s of Conversion, Artic o a "Florida Limited L	cles of Organization, a iability Company" in a	nd fees are submitted taccordance with s. 605	o convert an "Other .1045, F.S.
Please return all corr	espondence concernir	ng this matter to:		
Carla Friant				
	(Contact Person)			
Specialty Engineering	Services & Solutions, L	LC		
	(Firm/Company)	<del></del>		
18540 126th Terrace N	Vorth			
<u> </u>	(Address)			
Jupiter, FL 33478				
((	City, State and Zip Code)	-		
Jeffrey.Friant@special	tyengineeringservices.c	om		
E-mail Address: (to b	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
Carla Friant		_at ( <u>561</u> )707-	0714	
(Name of Conta	ct Person)	(Area Code) (Day	ytime Telephone Number)	
Enclosed is a check f dollars and drawn on	or the following amou a bank located in the	int: (All checks proces: United States)	sed by this office must	be payable in US
S150.00 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	S185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS New Filing Section Division of Corporati Clifton Building 2661 Executive Cente Callahassee, FL 3230	ons er Circle	MAILING A New Filing S Division of C P. O. Box 63: Tallahassee, I	ection Corporations 27	18 SEP - 6 PH

INHS11 (7/17)

# 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:  Specialty Engineering Services & Solutions, INC (PITOCOD(3712))
(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.
(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)
08/01/2017 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:
Specialty Engineering Services & Solutions, 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 ).
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.
5. 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 1 day of Suptember	<u>L</u> 20 <u>18</u>	
Signature of Authorized Representative of Lin	nited Liability Company:	
Signature of Authorized Representative: Printed Name: Carla Friant	Title: President	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: Carla Friant	Title: President	
Signature: At Air	Title: VICE President	
Signature:Printed Name:		
Signature: Printed Name:		
Signature: Printed Name:		
Signature: Printed Name:		
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	Officer. corporator must sign.	
Signature of one General Partner.	ty Partnersnip:	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
<u>Pees:</u>		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	7:-;

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compan	y is:	
Specialty Engineering Services & Solutions, LL	C	
	iability Company, "L.L.C.," or "L.L.C.")	<del></del>
	, , , , , , , , , , , , , , , , , , , ,	
ARTICLE II - Address:		
The mailing address and street address of the	ne principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
18540 126th Terrace North	18540 126th Terrace North	n
Jupiter, FL 33478	Jupiter, FL 33478	<u>-</u>
		<del></del>
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own I business entity with an active Florida registration.)	ered Office, & Registered Ag Registered Agent. You must designate an	ent's Signature: individual or another
The name and the Florida street address of t	the registered agent are:	
<u>Carla</u> F	Triant	
N	lame	
18540 126th Terrace Nort	h	
	P.O. Box NOT acceptable)	
i torida sireet address (	<del></del> · · ·	
Jupiter	FL 33478 Zip	
City	Zip	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and complession as accept the obligations of my position as	nd to accept service of process for ed in this certificate, I hereby ac- pacity. I further agree to complete ete performance of my duties, an	cept the appointment as ly with the provisions of all nd I am familiar with and
Cc2		Pic G
Registered Agent's S	Signature (REQUIRED)	
(CONT	FINUED)	21.
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The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Carla Friant
	18540126th Terrace North
	Jupiter, FL 33478
	34phor. 1 E 3047 0
AMBR	Jeffrey Friant
	18540 126th Terrace North
	Jupiter, FL 33478
<del></del>	
	in the second se
(Use attachment if necessary)	
	a
LE V: Other provisions, if any.	
v. Omer provisions, it any.	
	-
REQUIRED SIGNATURE:	
Signature of a member or a	un outhorized annual time of
This document is executed in accordance v	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awar
any false information submitted in a documas provided for in s.817.155, F.S.	nent to the Department of State constitutes a third degree
Carla Friant	
	ped or printed name of signee

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