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#### COVERALETTER

SUBJECT:F	Frei Resea	rch & Tech	npany) LLC
	(Name of Res	sulting Florida Limited Con	npany) /
		~	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
Matth	ew Frei		
^	(Contact Person)	•	
Frei Res	earch & Ter	chnology, C	.L C
	(Firm/Company)	, , , , , , , , , , , , , , , , , , ,	
6708 L	)artmouth (Address)	Ave N	
c 0	(Address)		
St. Peters	Shurg Fl City, State and Zip Code)	33710	
(6	City, State and Zip Code)		
matt@ F	FreiResearc	4. (om	
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
Matthew	Frei	at ( 843 ) 4	15 - 2298
(Name of Conta	act Person)	at ( <u>843</u> ) <u>4</u> (Area Code) (Day	rtime Telephone Number)
	or the following amou a bank located in the	· · · · · · · · · · · · · · · · · · ·	sed by this office must be payable in US
	<b>H</b>	<b>G</b>	<b>—</b>
\$150.00 Filing Fees (\$25 for Conversion	\$155.00 Filing Fees and Certificate of	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and
& \$125 for Articles of Organization)	Status	and Certified Copy	Certificate of Status
STREET ADDRES	S:	MAILING A	ADDRESS:

New Filing Section Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

New Filing Section Division of Corporations

2661 Executive Center Circle

Tallahassee, FL 32301

Clifton Building

New Filing Section

Division of Corporations

TO:

## **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:  Frei Research & Technology, LCC  (Enter Name of Other Business Entity)
(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
on 02/02/2015— (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Frei Research + Technology, LLC (Enter Name of Florida Limited Liability Company)
(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 474 day of September	_ 2018	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative: 2  Printed Name: Matthew & Free	Title: Ouner	
Signature(s) on behalf of Other Business Entity: [		
Signature: Matthew & Fre;	_ Title: _ authorical re	pucontative
Signature:Printed Name:	Title:	<u> </u>
Signature:Printed Name:	Title:	<del></del>
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	_ _
Signature:Printed Name:	Title:	<del></del> 
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ty Limited Partnership:	5. <b></b>
All others: Signature of an authorized person.		SEP 28
Fees:		<b>.</b> ,
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	MED: 50

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Frei Research & Technology, LLC  (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.)
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
Matthew Frei  6708 Dartmouth Ave N  5t Petersburg, FL 33710  Matthew Frei  6708 Dartmouth, Ave N  5t Petersburg, FL 33710
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Matthew Frei Name
6708 Dartmouth Ave N
Florida street address (P.O. Box NOT acceptable)
St Petersburg FL 33710 City Zip
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
man 1
Registered Agent's Signature (REQUIRED)
(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Matthew Frei 6708 Dartmouth Aue N St Petersburg, FL 337
	### 2 F
(Use attachment if necessary)	and the second s
Tective date is listed, the date must be specific ar of filing.)	g: (OPTIONAL) (OPTIONAL) and cannot be more than five business days prior to of 90 days
If the date inserted in this block does not meet the ument's effective date on the Department of State	applicable statutory filing requirements, this date will not be list seconds.
LE VI: Other provisions, if any.	

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.

Matthew R Fue;
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)