

L18000238591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

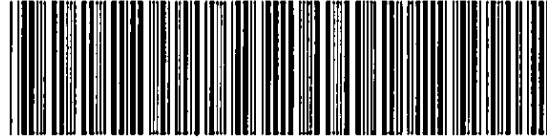
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DIVISION OF CORPORATIONS
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DATE: 10/16/18

NAME: ACCIDENT EXPERTS, INC

TYPE OF FILING: CONVERSION

COST: 150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

18 OCT 16 11:12:30

P1800030499

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:
ACCIDENT EXPERTS, INC

(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 FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)

on MARCH 29, 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**:
ACCIDENT EXPERTS 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 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.

18 OCT 16 PM 12:26

Signed this 11TH day of OCTOBER 20 18.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: _____

Printed Name: DERIK FAY Title: AUTHORIZED REPRESENTATIVE

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: _____

Printed Name: DERIK FAY Title: AMBR OF ATCF INVESTMENTS, LLC

Signature: _____

Printed Name: TONY V PEREZ Title: AMBR OF INFINITE SOLUTIONS MARKETING GROUP LLC

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

18 OCT 16 PM 10:56

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

ACCIDENT EXPERTS LLC

ARTICLE II ADDRESS

The principal address of the Limited Liability Company is:

885 SE 47TH TERRACE UNIT C

CAPE CORAL, FLORIDA 33904

The mailing address of the Limited Liability Company is:

345 LAKEVIEW DRIVE

NORTH FORT MYERS, FLORIDA 33917

ARTICLE III REGISTERED AGENT

The name and the Florida street address of the registered agent are:

A1A REGISTERED AGENT INC.

5647 110TH AVENUE N

ROYAL PALM BEACH, FLORIDA 33411

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.

X Tina Maki

TINA MAKI / Registered Agent's signature

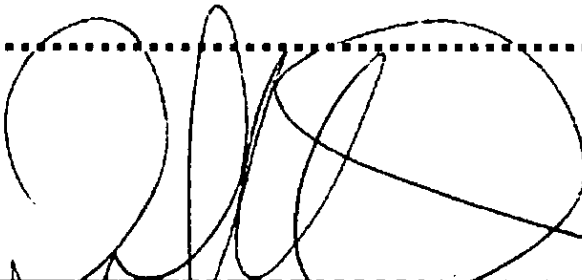
ARTICLE IV AUTHORIZED PERSON(S)

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER
ATCF INVESTMENTS LLC
1755 BOYSCOUT DRIVE
FORT MYERS, FLORIDA 33907

AUTHORIZED MEMBER
INFINITE SOLUTIONS MARKETING GROUP LLC
345 LAKEVIEW DRIVE
NORTH FORT MYERS, FLORIDA 33917

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FBI - FT. MYERS

.....

X _____
DERIK FAY / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)