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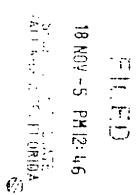
(F	Requestor's Name)
(/	Address)
(/	Address)
((City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(l	Business Entity Name)
])	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:





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COVER LETTER

TO: New Filing Se Division of Co				
SUBJECT: II Much F	abrication, LLC			
SOBJECT:	(Name of Res	sulting Florida Limite	ed Con	npany)
				d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corre	spondence concernin	g this matter to:		
John William Parsons, II				
II Much Fabrication, LLC	(Contact Person)	·		
19607 Robertson Street	(Firm/Company)			
Orlando, FL 32833	(Address)			
(C	ity, State and Zip Code)			
E-mail Address: (to be	used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
John Parsons		301 at (814-5	322
(Name of Contac	et Person)		(Day	time Telephone Number)
Enclosed is a check for dollars and drawn on a			ocess	ed 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 F and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	:			DDRESS:
New Filing Section Division of Corporation	ons	New Fil Division	_	ection orporations
Clifton Building		P. O. Bo		•

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: $M_{13} - 2890$
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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)
13 December 2004 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Il Much Fabrication, 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.

Signed this 7 day of October	20_18	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative: John William Parsons, II	Min Javan II Title: Co-Owner	_
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
Signature:	_ Title: Co-Owner	- -
Signature:/ Printed Name:	Title:	- -
Signature:Printed Name:	Title:	- -
Signature:Printed Name:	Title:	- -
Signature:Printed Name:	_ Title:	. -
Signature:Printed Name:	Title:	- -
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.	y Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		18 NOV
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	FILED : 16
	€,	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	any is:
II Much Fabrication, 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:
19607 Robertson Street	19607 Robertson Street
Orlando, FL 32833	Orlando, FL 32833
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another
The name and the Florida street address of	of the registered agent are:
John William Parsons, II	
	Name
19607 Robertson Street	
Florida street addres	s (P.O. Box NOT acceptable)
Orlando	FL 32833
City	Zip
liability company at the place design registered agent and agree to act in this statutes relating to the proper and com accept the obligations of my position	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all aplete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S Signature (REQUIRED)
(CO	NTINUED)

ARTICLE IV-

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 AMBR	John William Parsons, II						
	19607 Robertson Street						
	Orlando FL 32833	-					
AMBR	Lori Govelitz Parsons						
	19607 Robertson Street						
	Orlando, FL 32833	-					
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(Use attachment if necessary)	• • • • • • • • • • • • • • • • • • • •						
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		5					
ICLE V: Other provisions, if any.		-					
in a substitution of the s	ن المبارك المب	'					

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.

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)