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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

Division of Corporations	
SUBJECT: Marathon Investigative	Services, LLC
(Name of Re	sulting Florida Limited Company)
y was a Frontal Ellinted E.	eles of Organization, and fees are submitted to convert an "Other fability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:
Thomas S. Rice	
(Contact Person)	
<u>MapatNonthnVdetidatAvenBervices</u> (Firm/Company)	, Inc.
1006 North Florida Avenue	
(Address)	
DeLand, Florida 32720	
(City, State and Zip Code)	
E-mail Address: (to be used for future annual rep	
For further information concerning this matt	
Thomas S. Rice	at (407) 230-1316
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amoun dollars and drawn on a bank located in the U	nt: (All checks processed by this office must be payable in US inited States)
S150.00 Filing Fees (S25 for Conversion & \$125 for Articles of Organization) S155.00 Filing Fees and Certificate of Status	□S180.00 Filing Fees and Certified Copy □S185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, 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: Marathon Investigative Services, Inc. D18-44314
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>corporation</u>
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws ofFlorida
(Enter state, or if a non-U.S. entity, the name of the country)
on_May 15, 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: Marathon Investigative Services 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 31st day of January	20_ ¹⁹
Signature of Authorized Representative of Li	mited Liability Company:
Signature of Authorized Representative: Printed Name: Thomas S. Rice	Tial MGR
Signature(s) on behalf of Other Business Entity	! See helaw for required -:
Signature: Marla D. Shaw	2 oee below for required signature(s)
Signature:	
Printed Name: Marla D. Shaw	Title: MGR
Signature: Thomas S. Rice	
Printed Name: Thomas S. Rice	T. MGR
Thomas B. Rice	little: Hox
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title
	Title.
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Ir	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ity Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	***
	\$25.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00
Certificate of Status:	\$30.00 (Optional)
Softmone of Status.	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	pany is:	
Marathon Investigative Service		
(what contain the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	of the principal office of the Limited	l Liability Company is:
Principal Office Address:	Mailing Address:	
1006 North Florida Avenue DeLand, Florida 32720	1006 North Florida — DeLand, Florida 327	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of the properties of th	wn Registered Agent. You must designate an in-	it's Signature: dividual or another
Thomas S. Rice		
	Name	
<u> 2913</u> Condel Dri	ve	
	s (P.O. Box NOT acceptable)	
Orlando, Florid	a 32812 FL	
City	Zip	
Having been named as registered agent liability company at the place designe registered agent and agree to act in this statutes relating to the proper and com- accept the obligations of my position	nea in this certificate, I hereby accept capacity. I further agree to comply y plete performance of my during and I	ot the appointment as with the provisions of all I am familiar with and in Chapter 605, F.S.
		: · · · · · · · · · · · · · · · · · · ·
	3 / Lun	
	s Signature (REQUIRED) VTINUED)	TLED -6 PH 4: 56 Asset Floren

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

AUVITAR = AUThorized Mombas	
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Marla D. Shaw
	1006 North Florida Avenue
	DeLand, Florida 32720
MGR	Thomas S. Rice
	2913 Condel Drive
	Orlando, Florida 32812
	
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Use attachment if necessary)	
Use attachment if necessary) LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member or an This document is executed in accordance wi	a authorized representative of a member ith section 605.0203 (1) (b). Florida Statutes. I am aware int to the Department of State constitutes a third degree fe
Signature of a member or an This document is executed in accordance wi any false information submitted in a document as provided for in s.817.155, F.S.	un section 608 0000 (117/k) F1. 11 o
Signature of a member or an This document is executed in accordance with any false information submitted in a document as provided for in s.817.155, F.S. Thomas S. Rice	nt to the Department of State constitutes a third degree fe
Signature of a member or an This document is executed in accordance wi any false information submitted in a document as provided for in s.817.155, F.S. Chomas S. Rice Typed	nt to the Department of State constitutes a third degree feld or printed name of signee
REQUIRED SIGNATURE: Signature of a member or an This document is executed in accordance wi any false information submitted in a documen as provided for in s.817.155, F.S. Chomas S, Rice Typed	d or printed name of signee Filing Fees Organization and Designation of Registorials: