(Req	uestor's Name)	
(Addi	ress)	
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(City)	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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ertified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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19 FEB -4 AM 1: 02

COVER LETTER

New Filing Section Division of Corporations

TO:

SUBJECT: Authente	ehlT			
	(Name of Res	sulting Florida Limite	d Com	npany)
		-		d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
Kevin McNamee				
	(Contact Person)			
AuthentechlT				
	(Firm/Company)			
2983 Estates Terrace Sc	outh			
	(Address)			
eminole, FL 33776				
((City, State and Zip Code)			
evin.menamee@authen	techit.com			
E-mail Address: (to b	e used for future annual re	port notifications)		
or further information	on concerning this ma	tter, please call:		
evin McNamee		_at (282-6	409
(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)
	or the following amou a bank located in the		ocess	sed by this office must be payable in US
\$150.00 Filing Fees 25 for Conversion \$125 for Articles Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		S185.00 Filing Fees, Certified Copy, and Certificate of Status
REET ADDRES	S:		_	ADDRESS:
w Filing Section	-			
vision of Corporat fron Building	10118	P. O. Be		
51 Executive Cent	er Circle			FL 32314

llahassee, 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 Authentech!"	r Business Entity" immedia	tely prior to the filing of the	ne Articles of Conversion is:
	(Enter Name of Other Bus	siness Entity)	
2. The "Other Business Er	ntity" is a		
(Enter entity type	e. Example: corporation, limited	d partnership, general partnershi	ip, common law or business trust, etc.)
First organized, formed or	incorporated under the law	Florida (Enter state, or if a non-H.S.	entity, the name of the country)
1/22/2019; effective 4/1/20 on	19	(Enter state, or if a non-old.).	entity, the name of the country?
(date of organization, forma	ation or incorporation)		
3. The name of the Florid	a Limited Liability Compa	ny as set forth in the attacl	hed Articles of Organization:
(E	Enter Name of Florida Limited Li	ability Company)	
	date of filing, enter the effec		
the date this document is Note: If the date inserted in thi	s filed by the Florida Dep	artment of State.) able statutory filing requirement	ts, this date will not be listed as the
5. The plan of conversion	has been approved in accor	dance with all applicable s	statutes.
	r Business Entity" has agreed e entitled under ss. 605.1006		ng appraisal rights the amount to

Signed this 31st	day of January	20 19
Signature of Aut	horized Representative of	Limited Liability Company:
		2- N/
Signature of Auth	orized Representative:	1 /1968
Printed Name:	Kevin McNAME	e_ Title: _ouart
<u>Signature(s) on be</u>	ehalf of Other Business En	tity: [See below for required signature(s)]
Signature:	MA	
Printed Name:	Mar	Title:
	1 111.	
Signature:		Title: pune?
Printed Name:	KED, I MENAMER	Title: pune
C:		
Signature:		Title:
rrinted Name:		Title.
Signature:		
Printed Name:		Title:
Signature:		T'.)
'rinted Name:		Title:
Signature:		
Printed Name:		Title:
f Florida Corporature of Chair Directors or Off	ration: man, Vice Chairman, Direct icers have not been selected.	tor, or Officer. , an Incorporator must sign.
f Florida General ignature of one C	al Partnership or Limited I General Partner.	Liability Partnership:
Florida Limite ignatures of ALI	d Partnership or Limited I _ General Partners.	<u> Liability Limited Partnership:</u>
Il others: ignature of an au	thorized person.	
ees:		
Articles o	f Conversion:	\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy:

Certificate of Status:

19 FEB -1, AN 1: 03

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compan	y is:	
AuthentechIT, LLC		
(Must contain the words "Limited I.	.iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of t	he principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
12983 Estates Terrace South	12983 Estates Terrace South	
Seminole, FL 33776	Seminole, FL 33776	_
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of		individual or another
Kevin McNamee	No	
1	Name	
12983 Estates Terrace Sout		
Florida street address	(P.O. Box <u>NOT</u> acceptable)	
Seminole	FL 33776	
City	Zip	
	ted in this certificate. I hereby accapacity. I further agree to compolete performance of my duties, a as registered agent as provided for	cept the appointment as ly with the provisions of all nd I am familiar with and

"AMBR" = Authorized Member "MGR" = Manager Kevin McNamee 12983 Estates Terrace South Seminole. FL 33776 (Use attachment if necessary) TICLE V: Other provisions, if any, ordered and simply want to change my corporation to an LLC at it's inception. Talso would like to push up the the LLC comes to fruition to 2/1/2019 from 4/1/2019. 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 any false information submitted in a document to the Department of State constitutes a third degree fee	"MGR" = Manager 1298	ne and Address:
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	Kevin Management	nted 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)

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