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SECRETARY OF STATE

2019 JUN 19 AN 8: 54

TO THE STATE OF STATE

JUN 2 0 2019

K. Brumbley

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

6/19/19

NAME: INEX COATINGS INC

TYPE OF FILING: CONVERSION

COST:

155.00

RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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 Conversional Intex Coatings, Inc.	sion is:
(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	ss trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of the cou	intry)
11/09/2010 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organ Intex Coatings, LLC (Enter Name of Florida Limited Liability Company)	, marita.
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 dathe 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 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 an which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	nount to

SECRETARY OF STATE

Signed this 19 TH day of June	20_19		
Signature of Authorized Representative of Limited Liability Company			
Signature of Authorized Representative: Printed Name: Edward E. Elizando	Title: Member		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature: Edward E. Elizando	Title: President		
Signature:			
Printed Name:	Title:		
Signature			
Signature: Printed Name:	Title:		
Signature:			
Signature:Printed Name:	Title:		
Signature:Printed Name:	Title		
Timed (ture.	1100.		
Signature:			
Printed Name:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer.		
If Directors or Officers have not been selected, an In			
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:		
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.			
Fccs:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Intex Coatings, LLC	
(Must contain the words "Limite	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address o	f the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
3433Lithia Pinecrest Road	P.O. Box 357
Lithia FL 33547	Valrico, FL 33594
ARTICLE III - Registered Agent, Reg The Limited Liability Company cannot serve as its ov	istered Office, & Registered Agent's Signature:
The Limited Liability Company cannot serve as its over business entity with an active Florida registration.)	vn Registered Agent. You must designate an individual or another
The Limited Liability Company cannot serve as its over business entity with an active Florida registration.)	vn Registered Agent. You must designate an individual or another
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	vn Registered Agent. You must designate an individual or another
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of the company cannot serve as its own business entity with an active Florida street address of the company cannot serve as its own business cannot	on Registered Agent. You must designate an individual or another of the registered agent are:
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Paracorp Incorporated 155 Office Plaza Drive, F	on Registered Agent. You must designate an individual or another of the registered agent are:
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Paracorp Incorporated 155 Office Plaza Drive, F	on Registered Agent, You must designate an individual or another of the registered agent are: Name irst Floor

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..

JODY MOUA, ASSISTANT SECRETARY
Registered Agent's Signature (REQUIRED)

(CONTINUED)

A	T	TI	F	IV.	
А	n		 · .	1 V ·	-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Edward E. Elizando
	12220 S. Hwy 39
	Lithia, FL 33547
	
(Use attachment if necessary)	
(Ose attachment if necessary)	
ARTICLE V: Other provisions, if any.	
	its members for monetary damages for breach of fiduciary duty
as a member notwithstanding any provision of law impos	
faith or which involve intentional misconduct or a know	nate the liability of a member for acts or omissions not in good
	ing violation of law.
<u>REQUIRED</u> SIGNATURE:	}
	. /
Signature of a member or an	authorized representative of a member
This document is executed in accordance with	h section 605.0203 (1) (b), Florida Statutes, I am aware that
as provided for in s.817.155, F.S.	t to the Department of State constitutes a third degree felony
_ p	
Edv	vard E. Elizando

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)

Typed or printed name of signee