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PICK-UP	☐ WAIT	MAJL
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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: MICRO MO ELECTRONICS, L	.LC
	sulting Florida Limited Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li	eles of Organization, and fees are submitted to convert an "Other iability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:
Lynn Rose (504) 566-1311 (ext 1434)	
(Contact Person)	
Phelps Dunbar LLP	
(Firm/Company)	
365 Canal Street, Suite 2000	
(Address)	
New Orleans, LA 70130	
(City. State and Zip Code)	
rosel@phelps.com	
E-mail Address: (to be used for future annual rep	port notifications)
For further information concerning this mat	tter, please call:
Lynn Rose	at (504) 566-1311 ext. 1434
(Name of Contact Person)	at (504) 566-1311 ext. 1434 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the U	unt: (All checks processed by this office must be payable in US United States)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$180.00 Filing Fees and Certified Copy □\$185.00 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: MICRO MO ELECTRONICS, INC.
(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)
ON/31/1981 On
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: MICRO MO ELECTRONICS, 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.
5. 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 19th day of June	20 <u>19</u> .
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	P. F.A.
Printed Name: Ping P. Faulhaber	Title: Manager
Signature(s) on behalf of Other Business Entity:	 See below for required signatur
C-PaD	
Signature: Printed Name: Ping P. Faulhaber	Title: Director
Signature:Printed Name:Dodd Disler	Title: Director
Signature:Printed Name:	Title
Printed Name:	11tte:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
If Florida Corporation:	
H FIORIDA COLPOLATION:	Officer.
	
Signature of Chairman, Vice Chairman, Director, or (corporator must sign.
Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc If Florida General Partnership or Limited Liabilit	
Signature of Chairman, Vice Chairman, Director, or Olf Directors or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:
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Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liability Signature of one General Partner. If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	ty Partnership: ty Limited Partnership:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Mano Mora	recomposited the		
	LECTRONICS, LLC contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Add	ress:	principal office of the Limited Liability Compar	ny is:
Principal Office Ad	ldress:	Mailing Address:	
		i4881 Evergreen Avenue	
14881 Evergreen Avenu	ie	1 1001 Evergreen 11 conde	
(The Limited Liability Con business entity with an act	gistered Agent, Register apany cannot serve as its own Re- tive Florida registration.)	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another	
Clearwater, FL 33672-3 ARTICLE III - Reg (The Limited Liability Combusiness entity with an act	gistered Agent, Register ipany cannot serve as its own Re tive Florida registration.) orida street address of th	Clearwater, FL 33672-3008 ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:	
Clearwater, FL 33672-3 ARTICLE III - Reg (The Limited Liability Combusiness entity with an act	gistered Agent, Register apany cannot serve as its own Re- tive Florida registration.)	Clearwater, FL 33672-3008 ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:	
Clearwater, FL 33672-3 ARTICLE III - Reg (The Limited Liability Combusiness entity with an act	gistered Agent, Register apany cannot serve as its own Re- tive Florida registration.) orida street address of th Ping P. Far	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:	
Clearwater, FL 33672-3 ARTICLE III - Reg (The Limited Liability Combusiness entity with an act	gistered Agent, Register ipany cannot serve as its own Re tive Florida registration.) orida street address of th Ping P. Fat Na 14881 Evergreen	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:	
Clearwater, FL 33672-3 ARTICLE III - Reg (The Limited Liability Combusiness entity with an act	gistered Agent, Register ipany cannot serve as its own Re tive Florida registration.) orida street address of th Ping P. Fat Na 14881 Evergreen	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: ulhaber me a Avenue	

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

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

Title:	
"AMBR" = Authorized Member	
"MGR" = Manager	Diag D. Carllant
MGR	Ping P. Faulhaber
	14881 Evergreen Avenue
	Clearwater, FL 33672-3008
MGR	Dodd Disler
	14881 Evergreen Avenue
•	Clearwater, FL 33672-3008
(Use attachment if necessary)	
(Use attachment if necessary)	
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LE V: Other provisions, if any.	. R. A.A.
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware t
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware turnent to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	