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(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: New Filing Section Division of Corporations		•
SUBJECT: Quantum Technologies Florida, LLC	2	
(Name of Rest	ulting Florida Limite	d Company)
The enclosed Articles of Conversion, Articl Business Entity" into a "Florida Limited Lia	les of Organizationability Company	n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	
Steven A. Brezinski		
(Contact Person)		
Axley Brynelson, LLP		
(Firm/Company)		
P.O. Box 1767		
(Address)		
Madison, WI		
(City, State and Zip Code)		
danhark@gmail.com		
E-mail Address: (to be used for future annual rep	port notifications)	
For further information concerning this mat	tter, please call:	
Steven A. Brezinski	at (⁶⁰⁸	283-6723
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the l		ocessed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$180.00 Filing and Certified Copy	
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	New Fil Division P. O. Bo	ing Section of Corporations ox 6327 ssee, FL 32314

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 Quantum Technologies, Inc.	Articles of Conversion 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 trust, etc.)
First organized, formed or incorporated under the laws of Nevada (Enter state, or if a non-U.S. en	tity, the name of the country)
on 12/27/2005 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attache Quantum Technologies Florida, LLC	d Articles of Organization:
(Enter Name of Florida Limited Liability Company)	·
(The effective date: Cannot be prior to date of receipt or filed date nor more to 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, document's effective date on the Department of State's records.	
5. The plan of conversion has been approved in accordance with all applicable sta	tutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	

Signed this 8th day of Luly	_20 <u>_19</u>
/ Signature of Authorized Representative of Limi	
	011 65
Signature of Authorized Representative: Daniel Harkins	Wharking
Printed Name: Daniel Harkins	Title: Authorized Member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Organical Copy of Octan of Octan Dustress Same	see mion in reduited signification
Signature: Dayd Coeffert Printed Name: David Goepfert	
Printed Name: David Goepfert	Title: President
Timed (diffe)	
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
	
Signature:	
Signature:Printed Name:	Title:
Signature:	
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-	corporator must sign.
	•
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u>	
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

19 SEP -4 PH 2:41

ARTICLE I - Name: The name of the Limited Liability Cor	mpany is:
Quantum Technologies Florida, LLC	
(Must contain the words "Lin	nited Liability Company, "L.L.C.," or "L.L.C.")
RTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:
rincipal Office Address:	Mailing Address:
040 Rivershore Lane	13435 S. McCall Road, Unit 16-304
ort Charlotte, FL 33953	Port Charlotte, FL 33981
Daniel Harkins	Name
	Name
3040 Rivershore Land Florida street add	lress (P.O. Box <u>NOT</u> acceptable)
Port Charlotte	FL 33953
City	y Zip
– Having been named as registered ag	gent and to accept service of process for the above stated limited
liability company at the place des registered agent and agree to act in t statutes relating to the proper and c	this capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and tion as registered agent as provided for in Chapter 605, F.S
liability company at the place des registered agent and agree to act in t statutes relating to the proper and accept the obligations of my positions.	this capacity. I further agree to comply with the provisions of al complete performance of my duties, and I am familiar with and tion as registered agent as provided for in Chapter 605, F.S
liability company at the place des registered agent and agree to act in t statutes relating to the proper and accept the obligations of my positions.	this capacity. I further agree to comply with the provisions of al complete performance of my duties, and I am familiar with and tion as registered agent as provided for in Chapter 605, F.S

Title:	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	
MGR	David Goepfert
	12968 North Marsh Drive
	Port Charlotte, FL 33981
	
REQUIRED SIGNATURE:	
1) ung Cooffe	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felon
David Goepfert	72
Ту	ped or printed name of signee

ARTICLE IV-