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(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone #	F)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)
(De	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	

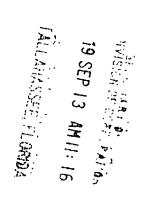
Office Use Only

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COVER LETTER

TO: New Filing So Division of C			
	n Equipment Company, LL	.C	
SUBJECT:	(Name of Res	ulting Florida Limited Co	mpany)
			nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:	
Joseph Taylor White			
	(Contact Person)		
Inspection Equipment Co	ompany, LLC		
	(Firm/Company)		
85 Sanford Avenue			
	(Address)		
DeBary, FL 32713			
((City. State and Zip Code)		
admin@eopsco.com			
E-mail Address: (to b	e used for future annual re	port notifications)	
For further information	on concerning this ma	tter, please call:	
Taylor White		_at (<u>850</u>) <u>426-</u>	1035
(Name of Conta	ct Person)	(Area Code) (Da	ytime Telephone Number)
	or the following amou a bank located in the	•	sed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILING.	ADDRESS:
New Filing Section		New Filing S	
Division of Corporati	ions	_	Corporations
Clifton Building		P. O. Box 63	
2661 Executive Cent	er Circle	Tallahaccee	FI 32314

Tallahassee, FL 32301

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 Articles of Conversion is: Inspection Equipment Company, LLC (19 - 345)
(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)
July 22, 2018 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:
Inspection Equipment Company, 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

Signed this 18th day of July	20_19
Signature of Authorized Representa	ative of Limited Liability Company:
Signature of Authorized Representative Printed Name: Joseph Taylor White	/e:Title: Authorized Member
	ness Entity: See below for required signature(s)
Signature: Printed Norwy Joseph Taylor White	
Printed Name: Joseph Taylor White	Title: Authorized Member
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman If Directors or Officers have not been s	, Director, or Officer. elected, an Incorporator must sign.
If Florida General Partnership or Lin Signature of one General Partner.	mited Liability Partnership:
If Florida Limited Partnership or Lin Signatures of <u>ALL</u> General Partners.	nited Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	

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

The name of the Limited Liability Cor	mpany is:
Inspection Equipment Company, LLC	
(Must contain the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
604 N. Volusia Avenue	604 N. Volusia Avenue
Orange City, FL 32763	Orange City, FL 32763
The name and the Florida street addre Joseph Taylor White	
	Name
85 Sanford Avenue	
Florida street add	dress (P.O. Box NOT acceptable)
DeBary,	FL 32713
Cit	y Zip
liability company at the place des registered agent and agree to act in a statutes relating to the proper and a accept the obligations of my posi	gent and to accept service of process for the above stated limite signated in this certificate. I hereby accept the appointment as this capacity. I further agree to comply with the provisions of a complete performance of my duties, and I am familiar with and ition as registered agent as provided for in Chapter 605, F.S
((CONTINUED)

ARTICLE IV-

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	Joseph Taylor White
	85 Sanford Avenue
	DeBary, FL 32713
AMBR	Benjamin C. Kenney
	7900 Estes Street
	Littleton, CO 80128
	
	
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LE V: Other provisions, if any.	ALLAII
REQUIRED SIGNATURE:	an authorized representative of a member 3
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu	an authorized representative of a member and authorized representative of a member are the with section 605.0203 (1) (b). Florida Statutes. I am aware the iment to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu	e with section 605.0203 (1) (b), Florida Statutes. I am aware the

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)