# 119000263505

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

Office Use Only



800335000288

19 HOW -1 PX 3: 3:

SECRETARY OF STATE

TILED.

!!2V I) 4 2019

.: Srumpley

# CT CORP

# 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

11/1/2019

D	Pate: 11/1/2019 4:
	Acc#I20160000072
Name:	BOILER REPAIR & SERVICE, LLC
Document #:	
Order #:	12371205
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:	
Apostille/Notarial Certification:	Country of Destination:  Number of Certs:
Filing: 🗸	Certified: Plain: ✓ COGS:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 150.00

Thank you!

### **COVER LETTER**

TO: New Filing Sec Division of Co				
	•			
SUBJECT: Boiler Repa	Olama of Ban	ulting Florida Limit	ud Com	
	(Name of Kes	ulting riorida Limio	ea Com	pany)
				I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corres	spondence concerning	g this matter to:		
Lee Fanyo				
	(Contact Person)			
Lewis Bess Williams and	Weese, P.C.			
	(Firm/Company)			
1801 California Street, Sui	ite 3400			
	(Address)			
Denver CO 80202				
(Ci	ty, State and Zip Code)			
thooven@lewisbess.com				
E-mail Address: (to be	used for future annual re	port notifications)		
For further information	n concerning this ma	tter, please call:		
Tina Hooven		_at ( 303	861-2	828
(Name of Contact	t Person)	(Area Code)	(Day	828 time Telephone Number)
Enclosed is a check fo dollars and drawn on a		•	rocess	ed 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 and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	:	MAILI	NG A	DDRESS:
New Filing Section		New Fi	_	
Division of Corporation	ons			orporations
Clifton Building	O' 1	P. O. B		
2661 Executive Center	r Circle	Lallaha	ssee 1	71 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.

(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnershi	p, 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)
10/28/1986	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attack	ned Articles of Organization:
Boiler Repair & Service, 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 mor	
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 requirement document's effective date on the Department of State's records.	is, this date will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable s	statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members havin	

Signed this 1st day of November	_ 20_19
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	~_
Signature of Authorized Representative: Printed Name: Scott Wulinsky	Title: CFO, Secretary, & Treasurer
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: Scott Wulinsky	
Printed Name: Scott Wulinsky	Title: CFO. Secretary, & Treasurer
Signature:	
Signature:Printed Name:	Title:
Signature:	T'd.
Printed Name:	
Signature:	
Signature:Printed Name:	
a:	
Signature:Printed Name:	Title
Frinted Name.	Truc.
Signature:	
Signature:Printed Name:	Title:
If Florida Corporations	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	ty Limited Partnership:
Signatures of ALL General Partners.	
All athors	
All others: Signature of an authorized person.	
organizate of all additionized persons	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

()	dust contain the words "Limited	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - A		Estra animainal affine of the Limited Liability Company is
The mailing addr	ess and street address of	f the principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
1300 NW 65th Place		214 North Tryon Street, Suite 2425
Fort Lauderdale FL	33309	Charlotte NC 28202
The name and the	CT Corporation System	of the registered agent are:  Name
	1200 South Pine Island I	Road
	Florida street addres	rss (P.O. Box <u>NOT</u> acceptable)
	Plantation	FL 33324
	City	Zip

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Rose Song, Assistant Secretary

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	MSHC, Inc.
ANIDA	214 North Tryon Street, Suite 2425
	Charlotte NC 28202
(Use attachment if necessary)	
(Ose added in incression),	
DEPT. Od.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	on authorized representative of a member
REQUIRED SIGNATURE:  Lee Famp  Signature of a member or  This document is even uted in accordance	r an authorized representative of a member te with section 605.0203 (1) (b), Florida Statutes. I am aware th nument to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE:  Lee Fange  Signature of a member or This document is executed in accordance any false information submitted in a document is a document in a document	an authorized representative of a member re with section 605.0203 (1) (b), Florida Statutes. I am aware the ument to the Department of State constitutes a third degree felo

ARTICLE IV-

| Siling Fees | Siling Fee for Articles of Organization and Designation of Registered Agent | Siling Siling Fee for Articles of Organization and Designation of Registered Agent | Siling Fees | Silin