

(Requestor's Name)					
(Address)					
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(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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T. SCOTT



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COVER LETTER

	New Filing So Division of C					
SURIE	ECT: GOCOM	PUTEK LLC				
0000		(Name of Res	ulting	g Florida Limite	d Con	npany)
						d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	return all corre	espondence concernin	g thi	s matter to:		
JIOVAN	NNY R GONZAI	.EZ				
		(Contact Person)				
COMPL	JTEK, INC.					
		(Firm/Company)				
8004 NV	W 154TH ST, 13	9				
		(Address)				
MIAMI	LAKES, FL 330	16				
		City, State and Zip Code)				
	√NYG@GOCON			<u></u>		
E-ma	ail Address: (to b	e used for future annual re	port r	notifications)		
For furt	ther informatio	on concerning this ma	iter,	please call:		
JIÖVAN	NNY R GONZAI	.EZ	at	(305	300-4	1770
	(Name of Conta	ct Person)			(Day	time Telephone Number)
		or the following amou a bank located in the			ocess	sed by this office must be payable in US
(\$25 for	.00 Filing Fees Conversion for Articles sization)	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I I Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREE	ET ADDRESS	S:		MAILI	NG A	ADDRESS:
New Filing Section				New Filing Section		
	n of Corporati Building	ons				orporations
Clifton Building 2661 Executive Center Circle				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 \$,695,1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: COMPUTEK, INC. O COMPUTEK, 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)
JANUARY 04 2005
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: GOCOMPUTEK 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

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

Signed this 9TH day of MARCH	20_20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: JIOVANNY R GONZALEZ	Title: MGR
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name: JIOVANNY & GONZALE	
Drinted Name: JIOVANNY & GONZALEZ	Title: PRESIDENT
Timed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Timed Name.	True
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Companyations	
<u>If Florida Corporation:</u> 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.	ty Partnership:
mg.mane of one conclusive maner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	ime:					
The name of the I	imited Liability Compan.	ıy is:				
GOCOMPUTEK LLC	>			_		
()	fust contain the words "Limited L	iability Company, "L.J	L.C.," or "LLC.")			
ARTICLE H - A The mailing addre		he principal offic	e of the Limited Liability C	Company is		
Principal Office	Address:	Mailing Address:				
8004 NW 154TH ST		8004 NW 1	54TH ST			
139		139		-		
MIAMI LAKES, FL 3	3016	MIAMI LAK	ES, FL 33016	_		
The Limited Liability business entity with a		Registered Agent. You the registered ag	Registered Agent's Signat in must designate an individual or and ent are:			
	1	Name				
	8004 NW 154TH ST #139					
	Florida street address	(P.O. Box <u>NOT</u> :	acceptable)			
	MIAMI LAKES	FL 3301	6			
	City		Zip			

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.

Registered Agents Signature (REQUIRED)

(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	
MGR	JIOVANNY R GONZALEZ
	8822 NW 152ND TER
	MIAMI LAKES, FL 33018
MBR	OLGA FUENTES
	8822 NW 152ND TER
	MIAMI LAKES, FL 33018
	
(Harmatanahar art 16 a anna anna)	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
Carry VI Other provisions, it may	
	\bigcap
/	
REQUIRED SIGNATURE: /	
	1-1
Signature of a member of	an aw Morized representative of a member
	e with section 605.0203 (1) (b), Florida Statutes. I am aware tha
any false information submitted in a doct as provided for in s.817.155, F.S.	iment to the Department of State constitutes a third degree felor
JIOVANNY R GONZALEZ	
Ty	yped or printed name of signee

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)