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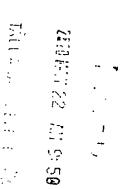
(Re	questor's Name)	
(Ád	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	·
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: M3Cloud, LLC		
(Name of Res	sulting Florida Limite	ed Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	_	on, 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:	
Marlene Coonts		
(Contact Person)	· · ·	
M3Cloud, LLC		
(Firm/Company)		
15880 Summerlin Rd Ste 300-315		
(Address)		
Ft Myers, FL 33908		
(City, State and Zip Code)		
marlene@m3cloud.com		
E-mail Address: (to be used for future annual re	port notifications)	
For further information concerning this ma	tter, please call:	
Marlene Coonts	_at (²⁶²	853-4558
(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	•	rocessed 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 Copy	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327	Ī	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

6/19/20

To Whom It May Concern:
This will serve as
a "Name Reliace Statement"
yor M3CIONDLLC.
as a representative for
M3CHud, I am reliasing
the intity M30 malle
originally registered as
a new entity in Florida
on 5/13/20 document #
and duriting on 5/20/20.
Thank you, Marline Cronts
Marline Cronts)

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: M3Cloud, LLC	
(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, et	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et	c.)
First organized, formed or incorporated under the laws of Wisconsin	
(Enter state, or if a non-U.S. entity, the name of the country)	
10/01/2010 on	
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	:
M3Cloud, 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 afte	r
the date this document is filed by the Florida Department of State.)	
<u>Note:</u> 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.

The state of the s			•	
Signed this 20	day of <u>May</u>	20 <u>20</u>		
Signature of Authori	zed Representative of	of Limited Liab	ility Company	
	. Y	May 1000 1	المراجعة ا	St. Commence
Signature of Authorize	ed Representative: 1	/ (MYLL)/YLC · C	NO YUS	
Printed Name: Marlene	Coonts	Title:	Manager	,
Signature(s) on behalf				
Signature: Maile Printed Name: Mark	n Conti			
Signature: // \text{Vertex}	via Coonti	Title	Mangaer	
Printed Name: NVOVI	116 (116.11.)	Title.	West teld City	1,
Signatura:				
Signature: Printed Name:			• _	•
Timed Name.				•
Signature:		•		• • • • • • • • • • • • • • • • • • •
Printed Name:		Title:		*
		· · ·		
Signature:		• • •	·	- <u>*</u> <u>*</u>
Printed Name:			·	
		•		
Signature:				* · · · · · · · · · · · · · · · · · · ·
Printed Name:		Title:	9.	
· -				
Signature:		•		
Printed Name:	<u> </u>	Title:	<u> </u>	
If Florida Corporation				• • •
Signature of Chairman,	Vice Chairman, Dire	ctor, or Officer.		1
If Directors or Officers 1	have not been selecte	d, an Incorporat	or must sign.	•
		T • 1'•1•4 To 4	•	
If Florida General Par		Liability Parti	nersnip:	
Signature of one Genera	I Partner.		•	
(FO TO 1)		T		
If Florida Limited Part		Liability Limit	ted Partnershi	<u> </u>
Signatures of ALL Gene	ral Partners.			
	••		•	
All others:				
Signature of an authorize	ed person.	• •	· +	
	**			
Fees:				
Articles of Conv	ersion:	\$25.0	0	
	Articles of Organiz		فلا كرسره الم	
Certified Copy:			0 (Optional)	
Certificate of Sta	atne	فيط فيون	(Optional)	
A COMMITTAL OF SECTION	ALGO.	יוט:כפי ייףיי	Mohnongride	新的4.00mm。 1.00mm。

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

M3Cloud, LLC		
(1)	Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - A	Address:	
The mailing addr	ess and street address of the	e principal office of the Limited Liability Company
Principal Office	Address:	Mailing Address:
		45000 0 K D LOV 000 045
15880 Summerlin	n Rd Ste 300-315	15880 Summerlin Rd Ste 300-315
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Ren active Florida registration.)	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Re	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Ren active Florida registration.) e Florida street address of the Marlene Coonts	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Ren active Florida registration.) e Florida street address of the Marlene Coonts	Ft Myers, FL 33908 ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Ren active Florida registration.) E Florida street address of the Marlene Coonts No. 15880 Summerlin Rd Ste	Ft Myers, FL 33908 ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Ren active Florida registration.) E Florida street address of the Marlene Coonts No. 15880 Summerlin Rd Ste	Ft Myers, FL 33908 ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are: ame 300-315

nited 15 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 Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

as provided for in s.817.155, F.S.

Marlene Coonts

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

Name and Address:
5.2
Britney Helm
15880 Summerlin Rd Ste 300-315
Ft Myers, FL 33908
Marlene Coonts
15880 Summerlin Rd Ste 300-315
Ft Myers, FL 33908
Corntz)

Typed 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)

any false information submitted in a document to the Department of State constitutes a third degree felony