

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



900354595459

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2020 NOV -9 NH 1: 34

Office Use Only

J. FASON

NOV 1 9 2020

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: KTEK SYSTEMS, LLC		
(Name of	Resulting Florida Lim	ited Company)
The enclosed Articles of Conversion, Ar Business Entity" into a "Florida Limited		ion, and fees are submitted to convert an "Other y" in accordance with s. 605.1045, F.S.
Please return all correspondence concern	ning this matter to:	
KIMBERLY KAYE DURING		
(Contact Person)		_
KTEK SYSTEMS		_
(Firm/Company)		
2454 N. McMULLEN BOOTH RD, SUITE 7	00	_
(Address)		
CLEARWATER, FL 33759		_
(City, State and Zip Cod	.e)	_
KIMBERLY.DURING@KTEK.COM		_
E-mail Address: (to be used for future annua	il report notifications)	
For further information concerning this	matter, please call:	
KIMBERLY K. DURING	at (⁷²⁷) 417-6747 (Daytime Telephone Number)
(Name of Contact Person)	(Area Code	(Daytime Telephone Number)
Enclosed is a check for the following an dollars and drawn on a bank located in t		processed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ ☐ \$155.00 Filing Fee and Certificate of Status	es ☐\$180.00 Filing and Certified Co	· •
Mailing Address:		Street Address:
New Filing Section		New Filing Section
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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.

K.TEK SYSTEMS, INC. (Enter Name of Other Business Entity)	.•	
2. The "Other Business Entity" is a		
(Enter entity type, Example: corporation, limited partnership, general partnership, commo	on 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 cour	itry)
10/1/1995		
on		
3. The name of the Florida Limited Liability Company as set forth in the attached Arti	cles of Organi	ization:
KTEK SYSTEMS, LLC		
(Eater Name of Florida Limited Liability Company)	•	
4. If not effective on the date of filing, enter the effective date:	<u>.</u> •	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 9 the date this document is filed by the Florida Department of State.)	0 calendar da	ys after
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	e will not be listed	l as the
5. The plan of conversion has been approved in accordance with all applicable statutes.	2021	
 The plan of conversion has been approved in accordance with all applicable statutes. The "Converted or Other Business Entity" has agreed to pay any members having apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	sal rights the an	nount to
	MH 1: 31	ز او او ورسيا

Signed this 20 day of SEPTEMBER 20 17. Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: Printed Name: KIMBERLY K. EURING Title: MGR Signature(s) on hehalf of Other Business Entity: [See below for required signature(s)] Signature: 🗾 Printed Name: KNOFRING Signature: ______ Title: ______ Signature: ______ Title: ______ Signature: Printed Name: _____ Title: _____ Printed Name: _____ Title: _____ Signature: Printed Name: ______ Title: _____ If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:
KTEK SYSTEMS, LLC	
Char contain the words "Limited Liab	oility Company, "L.L.C.," or "L.LC.")
ARTICLE II - Address:	
The mailing address and street adoress of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2454 K. MIMULLEN EGOTH RD	2454 N. McMULLEN BOOTH RD
SUITE 700	SUITE 700
CLEARWATER, FL 33759	CLEARWATER, FL 33759
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness or thy with an active Florida registration)	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another
The name and the Florida street address of th	e registered agent are:
KIMBERLY K. DURING	
Na	me
14 MERIDIAN DRIVE	
Florida street address (P	O. Box NOT acceptable)

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 Agent's Signature (REQUIRED)

SAFETY HARBOR

City

(CONTINUED)

ARTICLE IV-

. :

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

Name and Address:		
KIMBERLY K. DURING		
14 MERIDIAN DRIVE		
SAFETY HARBOR, FL 34695		
		
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	KIMBERLY K. DURING 14 MERIDIAN DRIVE	KIMBERLY K. DURING 14 MERIDIAN DRIVE

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.

KIMBERLY K. DURING

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)