# L20000373325

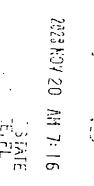
(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document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

Office Use Only



900355249269

11/20/20--01025--004 \*\*150.00





TO: New Filing Section
Division of Corporations

SUBJECT: AVA HVAC PRODUCTS LLC

(Name of Resulting Florida Limited Company)

		•		d fees are submitted to convert cordance with s. 605.1045, F.S.	
Please return all corr	espondence concernin	g this matter to:			
ROBERT K. MACKAY					
	(Contact Person)				
AVA HVAC PRODUCT	r\$ llc				
	(Firm/Company)	·			
2255 MARQUESA CIF	RCLE				
-	(Address)				
NAPLES, FL 34112					
	City, State and Zip Code)				
bmackay@ avahvacpro	-				
E-mail Address: (to b	oe used for future annual re	port notifications)			
For further informati	on concerning this ma	tter, please call:			
Robert K. MacKay		at ( 781	389-5	6425	
(Name of Conta	ect Person)	(Area Code)	(Day	time Telephone Number)	
	for the following amou a bank located in the	•	rocess	ed by this office must be payal	ble 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 I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	2
B. # 131		_	C	4.33	د (۲۰۰۷ د ۲۰۰۷ د ۲۰۰۷
<u>Mailing Add</u> New Filing S		•		Address: Filing Section	7027 HOY
Division of C				on of Corporations	$\sim$
P.O. Box 632	•			entre of Tallahassee	0

P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Taliahassee, FL 32303

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
Γhe name of the Limited Liability Company is:					
AVA HVAC PRODUCTS LLC					
(Must contain the words "Limited Liabilit	y Company, "L	.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the pr	rincipal offi	ce of the Limit	ted Liability Co	mpany	is:
Principal Office Address:	Mailing .	Address:			
AVA HVAC PRODUCTS LLC 2255 MARQUESA CIRCLE		C PRODUCTS!			
NAPLES,FL 34112		, MA 02115			
The name and the Florida street address of the r  \[ \frac{\int(1 \text{CHAP} \text{France}}{\text{Name}} \]  \[ \frac{55 \text{SW} \text{9th SW}}{\text{Florida street address (P.O)}} \]  \[ \frac{\int(1 \text{A} \text{IM})}{\text{City}} \]	cis Mac c rect f D. Box NOT	H 4303 acceptable)			
City		Zip			
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p accept the obligations of my position as reg	n this certific city. I furthe performance	cate, I hereby a r agree to com e of my duties,	iccept the appoi ply with the pro and I am familic	ntment o visions o ar with o	as of all and
			_	2029 NOY	i
Registered Agent's Sign	nature (REC	(UIRED)			
(CONTIN	IUED)		1975. 四少. 四 <u>卯</u>	20 AH 7: I	g la g E g ga

# ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	HOBERTK, MACKAY
ANDI	2255 MARQUESA CIRCLE
	NAPLES,FL 34112
MGR	ROBERTK, MACKAY
	2255 MARQUESA CIRCLE
	NAPLES,FL 34112
<del></del>	
(Use attachment if necessary)	
•	
(Use attachment if necessary)  LE V: Other provisions, if any.	
•	hur K. Maying
LE V: Other provisions, if any.	hur K. Maying
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am award ament to the Department of State constitutes a third degree to
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am award iment to the Department of State constitutes a third degree to
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am award iment to the Department of State constitutes a third degree to
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am award ament to the Department of State constitutes a third degree to the Constitutes at the degree of the Constitutes at
Signature of a member or This document is executed in a coordance any false information submitted in a document provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am awar iment to the Department of State constitutes a third degree

Signed this 14TH day of NOVEMBER	20 <u>20</u> .			
Signature of Authorized Representative of Limi	ted Liability Company;			
Signature of Authorized Representative:  Printed Name: ROBERT KENNETH MACKAY	Must K. May 7 Title: OWNER			
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)			
Signature(s) on behalf of Other Business Entity:   Signature:				
Printed Name: ROBERTK. MACKAY	Title: SINGLE MEMBER			
Signature:				
Printed Name:	Title:			
Signature:				
Signature:Printed Name:	Title:			
Signature:				
Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature:				
Printed Name:	Title:			
If Florida Corporation:				
Signature of Chairman, Vice Chairman, Director, or (				
If Directors or Officers have not been selected, an Inc	corporator must sign.			
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:			
All others: Signature of an authorized person.				
Fces:			2023	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	TE FL	BNOY 20 AM 7: 16	e min



# CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



## րկիսիսիությիրությիր արգրիկին իրկությունությել

ROBERT MACKAY 177 HUNTINGTON AVE STE 1700 BOSTON MA 02115-3165

### Why did I receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, ROBERT MACKAY is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.

### What if I have questions?

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 8:30 a.m. to 4:30 p.m..

### Visit us online!

Visit mass.gov/dor to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

end b. Glor

Edward W. Coyle, Jr., Chief

Collections Bureau



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts, 02183

### October 9, 2020

#### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

### AVA HVAC PRODUCTS LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on **July 11**, **2009**.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C. § 70 for said Limited Liability Company's dissolution; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: ROBERT KENNETH MACKAY

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: ROBERT KENNETH MACKAY

The names of all persons authorized to act with respect to real property listed in the most recent filing are: ROBERT KENNETH MACKAY



In testimony of which.

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth





Supplier of Specialized HVAC & Refrigeration Products and Services

November 14, 2020

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sir/Madam,

Please accept our submission. Enclosed are the Articles of Conversion and the Articles of Organization. We have enclosed our Certificate of Good Standing from the State of Massachusetts and a check as payment as well.

CURRENT ADDRESS: AVA HVAC PRODUCTS LLC 2255 Marquesa Circle Naples, FL 34112

CURRENT MAILING ADDRESS: AVA HVAC PRODUCTS LLC #93558 177 Huntington Ave #1700 Boston, MA 02115

Robert MacKay

Principal AVA HVAC PRODUCTS LLC Analysis ~ Procurement ~ Delivery

Consulting Services - Specialized Products - Factory Representatives













### **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: AVA HVAC PRODUCTS LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY  (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 11, 2009 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:  AVA HVAC PRODUCTS LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: JANUARY 1, 2021
(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.