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| | (Requestor's Name) |
|---------------------|--------------------------|
| | (Address) |
| | (Address) |
| | (City/State/Zip/Phone #) |
| | |
| | (Business Entity Name) |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instruction | is to Filing Officer: |
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3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

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Date: 12/29/2020

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Acc#I2016000072

| Name: | AVI-SPL LLC |
|-------------|-------------|
| Document #: | |
| Order #: | 13419585 |

| Certified Copy of Arts & Amend: | |
|------------------------------------|-------------------------|
| Plain Copy: | |
| Certificate of Good Standing: | |
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| Apostille/Notarial | Country of Destination: |
| Certification: | Number of Certs: |

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| Availability | |
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| Document | Amount: \$ 185.00 |
| Examiner | |
| Updater | |
| Verifier | |
| W.P. Verifier | |
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| | (Thank you!)) |

COVER LETTER

TO: New Filing Section Division of Corporations

AVI-SPL LLC

SUBJECT:

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Nicholas Cammarata

AVI-SPL

(Contact Person)

(Firn/Company) 6301 Benjamin Road, Suite 101

(Address)

Tampa, FL 33634

(City, State and Zip Code) Nicholas.Cammarata@avispl.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

| □ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | □\$155.00 Filing Fees and Certificate of Status | S180.00 Filing Fees and Certified Copy | ⊠\$185.00 Filing Fees, Certified Copy, and Certificate of Status |
|--|---|---|--|
|--|---|---|--|

Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 30, 2020

CT CORP

TALLAHASSEE, FL

SUBJECT: AVI-SPL LLC Ref. Number: W20000146749 CORRECTED Please Allow For Same File Date

We have received your document for and the authorization to debit your account in the amount of \$185.00. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The document number of the name conflict is F20000004819.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tammi Cline Regulatory Specialist II Supervisor

Letter Number: 520A00026279



· www.sunbiz.org

AVI-SPL 6301 Benjamin Road, Suite 101 Tampa, FL 33634

January 4, 2021

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Letter Number 520A00026279 / AVI-SPL, Inc. and AVI-SPL LLC

To Whom it May Concern:

I am in receipt of your letter number 520A00026279, dated December 30, 2020, stating that the articles of conversion converting Audio Visual Innovations, Inc. into a Florida limited liability company named AVI-SPL LLC cannot be completed due to the conflicting name of another existing entity, AVI-SPL, Inc. a Delaware corporation registered as a foreign corporation in Florida. I can hereby affirm and attest that AVI-SPL, Inc. is the sole shareholder of Audio Visual Innovations, Inc., that both entities have the same ultimate beneficial owners and officers, and that AVI-SPL, Inc. consents to the conversion of Audio Visual Innovations, Inc., into a Florida limited liability company with the name AVI-SPL LLC.

AFFIRMED AND ATTESTED AS OF JANUARY 4, 2021:

AVI-SPL, INC.

By: John Zetteh

Title: Chief Executive Officer

AUDIO VISUAL INNOVATIONS, INC.

By: John Zettel) Title: Chief Executive Officer

DocuSign Envelope ID: 5B55850D-AB4F-481C-B5F1-143522B60282

2020 DEC 29 AM 10+ 34

<u>Articles of Conversion</u> For <u>"Other Business Entity"</u> Into Florida Limited Liability Company

SECRETALC. OF STATE TALLAHOUSSEE, FL

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: Audio Visual Innovations, Inc.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a corporation

(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) Florida

First organized, formed or incorporated under the laws of

(Enter state, or if a non-U.S. entity, the name of the country)

April 4, 1980

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(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: AVI-SPL 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 24th day of December, 2020

Signature of Authorized Representative of Limited Liability Company:

| Signature of Authorized Representative: |
|---|
| Printed Name: John Zettel |

Title: Chief Executive Officer

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

| Signature: | |
|--------------------------|--------------------------------|
| Printed Name John Zettel | Title: Chief Executive Officer |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | 72.1 |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | |
| 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 <u>ALL</u> 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:

AVI-SPL LLC

...

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

| Principal Office Address: | Mailing Address: | |
|---------------------------|--------------------|--|
| 6301 Benjamin Road | 6301 Benjamin Road | |
| Suite 101 | Suite 101 | |
| Tampa, FL 33634 | Tampa, FL 33634 | |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

| The name and t | the Florida street address of th | e registered agent are: | ECRE TALL | n unan |
|----------------|----------------------------------|---------------------------------|--|------------------|
| | AVI-SPL, Inc. | | | , 199 |
| | Na | me | 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 | |
| | 6301 Benjamin Road, Suite | | AH D | O |
| | Florida street address (P | P.O. Box <u>NOT</u> acceptable) | 131, 131, 131, 131, 131, 131, 131, 131, | |
| | Tampa | 33634 FL | | |
| | City | Zip | | |

<u>__</u>2

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.

| DocuSigned by: |
|----------------|
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Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: | | |
|---|-------------------------------|------------|-------------|
| "MGR" = Manager | | | |
| MGR | John Zettel | | |
| | 6301 Benjamin Road, Suite 101 | - | |
| | Tampa, FL 33634 | _ | |
| MGR | Jan Reese | | |
| | 6301 Benjamin Road, Suite 101 | | |
| | Tampa, FL 33634 | _ | |
| MGR | Steven Benjamin | | |
| | 6301 Benjamin Road, Suite 101 | _ | - 7 |
| | Tampa, FL 33634 | -:0 1 | ;U(|
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| CLEV: Other provisions if any | | - | |

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

B644EFBFFF3745A

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.

John Zettel

Typed or printed name of signeeFiling 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)