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NAME: OPTRONIC LABORATORIES, INC

TYPE OF FILING: CONVERSION

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ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE Obline Holge

Articles of Conversion

For

"Other Business Entity"

lnto

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 Limbility Company in accordance with s.605.1045, Florida Statutes.

 The name of the "Other Business-Entity" immediately pric Optronic Laboratories, Inc. 	or to the filing of the Articles of Conversion is.
(Enter Name of Other Business Ent	ity)
2. The "Other Business Entity" is a Corporation	8000077200
(Enter entity type: Example: corporation, limited partners	nip, general partnership, common law or ousiness dust, etc.)
First organized, formed or incorporated under the laws of	state, or if a non-U.S entity, the name of the country)
September 11, 2018	,, , , , , , , , , , , , , , , , , , ,
(date of organization, formation or incorporation)	
3. The name of the Florida Edmited Liability Company as set	forth in the attached Articles of Organization:
Optronic Laboratorles, LLC	
(Enter Name of Florida Limited Liability Go	mpany)
4. If not effective on the date of filing, enter the effective date (The effective date: Cannot lie prior to date of receipt or fittle date this document is filled by the Florida Department Note. If the date instruct in this block does not inservine applicable statud document's effective date on the Opparament of State's records.	Hed date not more than 90 calendar days after of State.)
5. The plan of conversion has been approved in accordance w	rith 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 crititled under ss. 605.1006 and 605.1061-605.1072, F.S.



Signed this	25th	day of February	. , , , , .	20_21	
Signature	of Author	zed Representative	e of Limit	ed Liability Compa	ny:
Signature o	f Authoriz	ed Representative:	-4	Title: Manager	
		Silverman			
				See below for require	
Printed Nan	ne: Jay M.	iverman		Title: President	
Signature: _ Printed Nam	 ne:		<u>. </u>	Title:	
Signature:					
Printed Nan	ne:			_ Title:	
Signature: Printed Nam	ne:			Title:	
Signature:				Title:	· · · · · · · · · · · · · · · · · · ·
Printed Nan	ne:			Title	
If Florida C Signature of	Corporatio f Chairman	<u>n;</u> , Vice Chairman, Dir	rector, or C	Officer.	
If Directors	or Officers	have not been select	ted, an lisc	outgration winst sign.	
If Florida I Signature of	Seperal Pa f one Gene	rtnership or Cimite al Palmer	d Disbilit	Paranership:	
If Florida I Signatures c	imited Pa	ituership or Limite nemi Partners.	य गिर्माह	v Limited Partnershi	<u>io:</u>
All others: Signature of	f an authori	zed person.			
Fees:					
Fee: Cen	icles of Co s for Floric tified Copy tificate of	la Articles of Organi	lżation:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Optronic Laboratorie	es, LLC		
		ed Liability Company, "L.L.C.," or "L.L.C.")	
ARTICLE II - Ad			
The mailing address	s, and street address o	of the principal office of the Limited Liability Compa	any is
Principal Office A	ddress:	Mailing Address:	
4632 36th Street		4632 36th street	
Orlando, FL 32811		Offande, FL 32811	
ARTICLE III - R	egistered Agent. Re	gistered Office. & Registered Agent's Signature:	75
(The Limited Liability Co business earlity with an a	ompany carnot serve as its country Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another off the registered agent are:	2021 HAR -2
(The Limited Liability Co business earlity with an a	ompany carnot serve as its country Florida registration.)	own Registered Agent. You must designate an individual or another of the registered agent are:	<i>L</i> ?
(The Limited Liability Co business earlity with an a	ompany campa serve as us o active Florida registration.) Florida street address	own Registered Agent. You must designate an individual or another	-2 PH
(The Limited Liability Co business earlity with an a	ompany campa serve as us o active Florida registration.) Florida street address	own Registered Agent. You must designate an individual or another of the registered agent are:	-2 PH 12:
(The Limited Liability Co business earlity with an a	ompany campa serve as its of active Florida street address day M. Silverman 4652, 36th Street	own Registered Agent. You must designate an individual or another of the registered agent are:	-2 PH
(The Limited Liability Co business earlity with an a	ompany campa serve as its of active Florida street address day M. Silverman 4652, 36th Street	own Registered Agent. You must designate an individual or another of the registered agent are:	-2 PH 12:

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 camplete performance of my autles, 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)

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

M 4 3 2 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Inv. M. Cilunamo
MGR	Jay M. Silverman 4632-36th Street
	Oriando, FL 32811
	OHRINO, FL 32511
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(Use attachment if necessary)	
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REQUIRED SIGNATURE:	
LEV: Other provisions, if any REQUIRED SIGNATURE: Signature of a member or	an anthorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	with section 605,0203 (1) (b) Florida Statutes, I am aware to
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with secution 505,0203 (1) (b), Florida Statutes. I am aware the Department of State constitutes a third degree feld
REQUIRED SIGNATURE: Signature of a member or This document is executed in a document as provided for in a 817.155, Fis.	with section 605,0203 (1) (b) Florida Statutes, I am aware to
REQUIRED SIGNATURE: Signature of a member or This document is executed in a document as provided for in £817.155, F.S. Jay M. Silvermain	with section 505,0203 (1) (b); Florida Statutes, I am aware the title the Department of State constitutes a third degree feld
REQUIRED SIGNATURE: Signature of a member or This document is executed in a document as provided for in £817.155, F.S. Jay M. Silvermain	with section 505,0203 (1) (b); Florida Statutes, I am aware to the Department of State constitutes a third degree feld the Department of State constitutes a third degree feld ped of printed name of signee
REQUIRED SIGNATURE: Signature of a member or This document is excluded in a document provided for in \$817.155, Fig. Jay M. Silverman	with section 505,0203 (1) (b); Florida Statutes, I am aware the title the Department of State constitutes a third degree feld