# L21000113710

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

Office Use Only



400359550344

SIGNETATION STATE

#### Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 03/17/2021		**WALK IN**
MACNE	IL AVIATION LLC	***************************************
ENTITY NAME MACNE	IL AVIATION, ELC	
DOCUMENT NUMBER_		
	**PLEASE FILE THE ATTACHED AND RETURN **	
XXXX	Plain Copy	Table to
	Certified Copy	
	Certificate of Status	
	CLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**  Certified Copy of Arts & Amendments  Certificate of Good Standing	. 1.2
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINAT	TON	_
NUMBER OF CERTIFICAT	TES REQUESTED	-
TOTAL OWED \$150.00	ACCOUNT #: I20160000072	
Please call Tina at th	e above number for any issues or concerns. Thank you so m	uch!



### FLORIDA DEPARTMENT OF STATE PIR 19 AM 1: 02 Division of Corporations

March 18, 2021

SUNSHINE STATE

CC....CIED
Please Nov For
Same File Date

Letter Number: 621A00005700

SUBJECT: MACNEIL AVIATION, LLC

Ref. Number: W21000035861

We have received your document for MACNEIL AVIATION, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Correct the State on the Articles of Conversion in #2.

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.

Neysa Culligan Regulatory Specialist III

www.sunbiz.org

FILED

2021 MAR 17 PH 4: 39

Articles of Conversion
For
"Other Business Entity"

SECRE: A
TALL/:

SECRETARY OF STATE
TALL/ 10.88 FE, FL

### 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.

The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(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)
On March 28, 2001 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MacNeil Aviation, 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	17	_ day of	March	20	21
Signature of	Author	rized Repr	esentative of Li	mited Lia	bility Company:
Signatura of A	انمالمان	ead Dannas	miativo.	aren 7	Nikesh
Printed Name	Cuthoi i	Karen	Mikesh	Title	NikeshAuthorized Agent
Timed Name.					Authonized Agent
Signature(s) o	n beha	If of Other	<b>Business Entity</b>	: [See bel	ow for required signature(s)
					•
Signature: <u>4</u>	av	id r.	macNei	<u>e</u>	Manager
Printed Name:		David F	. MacNeil	Title:	wanager
Signature:					
Printed Name:				Title	
Triffed (valife)					
Signature:					
Printed Name:				Title:	
2:					
Signature:				7927.1	
Printed Name:			·	litte:	
Signature:					
Printed Name:				Title:	
			-		
Signature:					
Printed Name:				Title:	
If Florida Cor	rnorati	on.			
			irman, Director, e	or Officer	
			ocen selected, an		or must sign.
			· · · · · · · · · · · · · · · · · · ·		
			or Limited Liab	ility Parti	iership:
Signature of or	ne Gene	eral Partner.			
If Planida Lim	aidad D		au I imritad I iah		ed Dantasunkin.
Signatures of A				iiiy Limii	ted Partnership:
algharares of 2	100 O		Ç13.		
All others:					
Signature of ar	ı author	ized person	•		
Fees:					
Article	e of Co	onversion:		\$25.00	<b>1</b>
			of Organization		
	ed Cop		of Organization		00 (Optional)
	ca Cop cate of				(Optional)
COULI	cate OI	otatus.		טע.כנ.	INDUMBAL

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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	MacNeil Aviat	ion, LLC	
(	Must contain the words "Limited Lia	ibility Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - A The mailing add		e principal office of the Limited Liabili	ty Company is:
Principal Office	Address:	Mailing Address:	
84 Isla Bahia Fort Lauderd	a Drive ale, FL 33316	84 Isla Bahia Drive Fort Lauderdale, FL 33316	. <del></del>
(The Limited Liability		ered Office, & Registered Agent's Sig	nature:
(The Limited Liability business entity with a	Company cannot serve as its own R	ered Office, & Registered Agent's Sig egistered Agent. You must designate an individual o	nature:
(The Limited Liability business entity with a	Company cannot serve as its own R in active Florida registration.)	ered Office, & Registered Agent's Sig egistered Agent. You must designate an individual of the registered agent are:	nature:
(The Limited Liability business entity with a	Company cannot serve as its own R in active Florida registration.) e Florida street address of the David F.	ered Office, & Registered Agent's Sig egistered Agent. You must designate an individual of the registered agent are:	nature:
(The Limited Liability business entity with a	Company cannot serve as its own R in active Florida registration.) e Florida street address of the David F.	ered Office, & Registered Agent's Sig egistered Agent. You must designate an individual of the registered agent are:	nature:
(The Limited Liability business entity with a	Company cannot serve as its own R in active Florida registration.)  e Florida street address of the David F.  N.  84 Isla Bahia Drive	ered Office, & Registered Agent's Sig egistered Agent. You must designate an individual of the registered agent are:	nature:
(The Limited Liability business entity with a	Company cannot serve as its own R in active Florida registration.)  e Florida street address of the David F.  N.  84 Isla Bahia Drive	ered Office, & Registered Agent's Sig egistered Agent. You must designate an individual of the registered agent are:  MacNeil ame  P.O. Box NOT acceptable)	nature:

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.

David F. MacNeil
Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Dovid E MacNail
MGR	David F. MacNeil 84 Isla Bahia Drive
	Fort Lauderdale, FL 33316
	<del></del>
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)  LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	I F 7Man Alail
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	F. MacNeil
LE V: Other provisions, if any.  REQUIRED SIGNATURE:  David	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:  David  Signature of a member or a	an authorized representative of a member
REQUIRED SIGNATURE:  David  Signature of a member or a This document is executed in accordance	
REQUIRED SIGNATURE:  David  Signature of a member or a This document is executed in accordance any false information submitted in a document and the submitted in a document and the submitted in a document is executed in a docu	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member or a 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 with section 605.0203 (1) (b), Florida Statutes, I am aware ment to the Department of State constitutes a third degree fe

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

ARTICLE IV-