121000241986

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

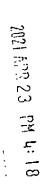
Office Use Only

J. FASON MAY 25 2021

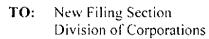


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COVER LETTER





SUBJECT: Robex International, LLC

(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:

Gianni B. Arcaini					
	(Contact Person)		-		
	(Firm/Company)		-		
7889 Hunters Grove R	toad				
	(Address)		-		
Jacksonville, FL 32256	5				
(6	City, State and Zip Code)		-		
gba@arcaini.com					
E-mail Address: (to b	e used for future annual re	port notifications)	-		
For further informati	on concerning this ma	tter, please call:			
Gianni B. Arcaini		at (⁹⁰⁴	612-0	0310	
(Name of Conta	ect Person)	(Area Code)	(Day	ytime Telephone Number)	
	or the following amou a bank located in the		rocess	sed by this office must be payable in U	JS
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$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

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> 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: Robex International, Inc.
(Enter Name of Other Business Entity)
(Enter Name of Other Dusiness Entry)
2. The "Other Business Entity" is a corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
on 9/01/81, as amended 11/22/91
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Robex International, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: May 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

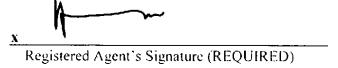
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed t	his 16th	day.of_April	20 <u>21</u>
C:	4 4	of made Filtrans and a second and formal at	
			Limited Liability Company:
Signatur	re of Authori	zed Representative: x	
Printed 1	Name: Gianni	B. Arcaini	Title: Manager, Authorized Member
<u>Signatu</u>	re(s) on beha	lf of Other Business En	tity: [See below for required signature(s)]
c	e: X		
Printed 1	Vame Gianni	B Arcaini	Title: Chairman, President, Director
· · · · · · · · · · · · · · · · · · ·	Tame. o.a.	<i>5.740</i>	Title, Statistically, Fedicati, Biredol
Signatur	e:		
Printed 1	Vame:		Title:
411			
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rimedi	Name:		Title:
Signatur	e:		
Printed 1	Vame:		Title:
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Printed 1	Name;		Title:
Sionatur	e.		
Printed N	v Vame:		Title:
	<u> </u>	· · ·	
	la Corporati		
		n, Vice Chairman, Directo	
If Direct	ors or Officer	s have not been selected,	an Incorporator must sign.
If Florid	la General P	artnership or Limited L	iability Partnership
	e of one Gene		nationer actives in p.
-			
			iability Limited Partnership:
Signatur	es of <u>ALL</u> Ge	eneral Partners.	
All otho	ma.		
All othe	<u>rs:</u> e of an authoi	ized person	
orginatur	e or an addica	ized person.	
Fees:			
A	Articles of Co	onversion:	\$25.00
		da Articles of Organizat	
(Certified Cop	y:	\$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:
Robex International, LLC	
(Must contain the words "Limited Liab	bility Company, "E.E.C.," or "ELC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7889 Hunters Grove Road	7889 Hunters Grove Road
Jacksonville, FL 32256	Jacksonville, FL 32256
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another the registered agent are:
Gianni B. Arcaini	
Na	me
7889 Hunters Grove Road	
Florida street address (P	O. Box NOT acceptable)
Jacksonville	FL 32256
City	Zip

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..



(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
AMBR, MGR	Gianni B. Arcaini		
	7889 Hunters Grove Road		
	Jacksonville, FL 32256		
	21		
	702		
	<u> Tin</u>		
	——————————————————————————————————————		
	2		
			
(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·		
(or announced in the constant,)	. 00		
ARTICLE V: Other provisions, if any.			
THE TODE TO Other provisions, it any.			
· · · · · · · · · · · · · · · · · · ·			
REQUIRED SIGNATURE:			
A SIGNATURE.			
x 1			
A 1			

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.

Gianni B. Arcaini

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)