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(Reque	stor's Name)	····
(Addres	ss)	
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(City/St	ate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busine	ss Entity Nar	ne)
(Docum	nent Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filin	g Officer:	
		;

Office Use Only

W2/WD 28559

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T. SCOTT



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May 22, 2021

GEORGE REED 2175 DUMAS ST MERRITT ISLAND, FL 32952

SUBJECT: RECON CONSTRUCTION LLC

Ref. Number: W21000028959

We have received your document for RECON CONSTRUCTION LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Conversion must be sign

Please return the corrected original and one copy of 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.

Letter Number: 121A00010948

Tyrone Scott Regulatory Specialist II New Filings Section

2881 JULIO AHII: 50

COVER LETTER

Division of Corporations	
SUBJECT: RECON CONSTRU) C+104
(Name of Resulting Florida L	imited Company)
The enclosed Articles of Conversion, Articles of Organia Business Entity" into a "Florida Limited Liability Comp	
Please return all correspondence concerning this matter t	o:
Cechge Reed (Contact Person) RECEN CENSANCE FLOY (Firm/Company) 2175 Dumas St	
(Contact Person)	
RECON CONSERVOLLION	
(Firm/Company)	
2175 Dumas St	
. (Address)	
(Address) Markith Is cand FL 3 (City, State and Zip Code) Record Services FL a G main	2952
(City, State and Zip Code)	
RECONSORVERS FLO GMAIL	Cow
E-mail Address: (to be used for future annual report notification	<u>s)</u>
For further information concerning this matter, please ca	II:
(Name of Contact Person) at (321)	S63 3809
(Name of Contact Person) (Area Co	ode) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All check	s processed by this office must be payable in US
dollars and drawn on a bank located in the United States	
\$\times \text{\$150.00 Filing Fees} (\$25 for Conversion & \$125 for Articles of Organization)} \text{\$\subseteq \text{\$155.00 Filing Fees} and Certificate of and Certified } \text{\$\text{\$and Certified of Organization}} \text{\$\text{\$\text{\$}}\$}	ling Fees
Mailing Address:	Street Address:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

TO: New Filing Section

Articles of Conversion

For Cother 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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a S CORP
z. the Other Business Entity is a
(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 popul Scenity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on O1/01/2018 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Recon Construction 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 mount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 24 day of Day vary	20 21
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Le Printed Name: Goals WREED	Title: Skesident
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Printed Name: Goolg wheel	Title: Mg
Signature:Printed Name:	Title:
Signature: Printed Name:	T'.1
Printed Name:	ritte:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Recon Construction	
(Must contain the words "Limited Liability Con	npany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princi	pal office of the Limited Liability Company is:
Principal Office Address: M	lailing Address:
3815 NO US HWY 1 3 5+2 9 COCUM FL 72926	3815 No US HWY 1 5+e 9 COCOA FL 32926
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the regis	tered agent are:
Cochqo Ro Name	ep
Name	
2175 Dumas	5 +
Florida street address (P.O. Bo	x NOT acceptable)
Mekkitt Iscand	FL . 32952
City	Zip
Having been named as registered agent and to acceliability company at the place designated in this registered agent and agree to act in this capacity. statutes relating to the proper and complete performance accept the obligations of my position as register. Registered Agent's Signatur (CONTINUEL	I further agree to comply with the provisions of all brance of my duties, and I am familiar with and red agent as provided for in Chapter 605, F.S Ol

<u>Title:</u> "AMBR" = Authorized Memb	Name and Address:
"MGR" = Manager	Goodge Reed
_Vr13 R	2025 Dungs C+
	2175 Dumas s+ Merri++ Island FC 32
MOD	Shawn Reed
VI J. A	3732 N. SURRWOOD CIR
	COCOM PL 32926
(Use attachment if necessary)	
LE V: Other provisions, if any	<i>r</i> .
LE V: Other provisions, if any	/
LE V: Other provisions, if any	/.
LE V: Other provisions, if any REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	Loep L
Signature of a mem This document is executed in accounty false information submitted in	ber or an authorized representative of a member cordance with section 605.0203 (1) (b), Florida Statutes. I am aware that in a document to the Department of State constitutes a third degree felony
Signature of a mem This document is executed in accany false information submitted in as provided for in s.817.155, F.S.	ber or an authorized representative of a member cordance with section 605.0203 (1) (b), Florida Statutes. I am aware that in a document to the Department of State constitutes a third degree felony
Signature of a mem This document is executed in accany false information submitted in as provided for in s.817.155, F.S.	ber or an authorized representative of a member cordance with section 605.0203 (1) (b), Florida Statutes. I am aware that in a document to the Department of State constitutes a third degree felony

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-