# L210003397-95

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

|           | New Filing Se<br>Division of C   |   |                                    |                 |  |
|-----------|--|---|------------------------------------|-----------------|--|
| SUBJE     | CT. HAWKS  | BBILL CONSULTING, LL                                  | _C                                 |                 |  |
| SOBJE     | C1   |   | ulting Florida Lin                 | nited Con       | npany)   |
|           |  |   |                                    |                 | d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.                                       |
| Please r  | eturn all corre  | espondence concerning                                 | g this matter to                   | :               |  |
| Anthony   | J. Motschenba  | acher   |                                    |                 |  |
|           |  | (Contact Person)                                      |                                    | <del></del>     |  |
| Motsche   | enbacher & Bla   | ttner LLP   |                                    |                 |  |
|           |  | (Firm/Company)  |                                    |                 |  |
| 117 SW    | Taylor Street,   | STE 300   |                                    |                 |  |
|           |  | (Address)   |                                    |                 |  |
| Portland  | I, OR 97204  |   |                                    |                 |  |
|           | ((   | City, State and Zip Code)                             |                                    | <u> </u>        |  |
| jwang@    | portlaw.com  |   |                                    |                 |  |
| E-ma      | il Address: (to b  | e used for future annual re                           | port notifications)                |                 |  |
| For furt  | her information  | on concerning this ma                                 | tter, please call                  | :               |  |
| Anthony   | J. Motschenb   | acher   | _at ( 503                          | 1417-           | 0500   |
|           | (Name of Conta   | et Person)  | (Area Coo                          | le) (Day        | rtime Telephone Number)  |
|           |  | or the following amou<br>a bank located in the        |                                    | process         | sed by this office must be payable in US   |
| (\$25 for | 00 Filing Fees<br>Conversion<br>or Articles<br>ization)                        | ☐\$155.00 Filing Fees<br>and Certificate of<br>Status | □\$180.00 Filit<br>and Certified C |                 | ☐\$185.00 Filing Fees,<br>Certified Copy, and<br>Certificate of Status   |
|           | Mailing Add<br>New Filing S<br>Division of C<br>P.O. Box 632<br>Tallahassee, I | ection<br>orporations<br>7                            |                                    | New Divis The C | t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303 |

### Articles of Conversion

For

# "Other 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.

| HAWKSBILL CONSULTING, LLC   |    |
|---|----|
| (Enter Name of Other Business Entity)   |    |
| 2. 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 OREGON  (Enter state, or if a non-U.S. entity, the name of the country)   |    |
| 7/22/2013   |    |
| on  |    |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:   | :  |
| HAWKSBILL CONSULTING, 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. | Γ  |
| 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.  | ì  |

| Signed this 16 th day of July   | 20,21  |
|---|--|
| Signature of Authorized Representative of Limit   | ed Liability Company:  |
| Signature of Authorized Representative: Printed Name: Gorken Mimioglu   | Title: Manager   |
| Signature(s) on behalf of Other Business Entity: [  | See below for required signature(s)                            |
| Signature: John Likeigh. Printed Name: Gorken Mimioglu  |  |
| Printed Name: Gorker Mimioglu   | Title: Manager   |
| Signature:  |  |
| Signature:Printed Name:   | Title:   |
| G:  |  |
| Signature:Printed Name:   | Title:   |
|   |  |
| Signature:  | Tielo  |
| Printed Name:   | Title:   |
| Signature:  |  |
| Printed Name:   | Title:   |
| Signature:  |  |
| Signature:Printed Name:   | Title:   |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc. |  |
| If Florida General Partnership or Limited Liability<br>Signature of one General Partner.  | y Partnership:   |
| If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.   | y 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<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) |

| ARTICLES OF ORGANIZATION FOR FLO   | ORIDA LIMITED LIABILITY CO  | IVIPANY                  |           |
|--|---|--------------------------|-----------|
| ARTICLE I - Name:  |   |                          |           |
| The name of the Limited Liability Company is:  |   |                          |           |
|  |   |                          |           |
| HAWKSBILL CONSULTING, LLC  (Must contain the words "Limited Liability  | Company of 1 C Pagent I C P)  |                          |           |
| (Must contain the words "Limited Liability   | Company, L.L.C., or LLC.  |                          |           |
| ARTICLE II - Address:  |   |                          |           |
| The mailing address and street address of the pri  | ncipal office of the Limited Liability C  | ompany i                 | S:        |
| Principal Office Address:  | Mailing Address:  |                          |           |
| 7307 Sandscove Court, Suite 7  | 7307 Sandscove Court, Suite 7   |                          |           |
| Winter Park, FL 32792  | Winter Park, FL 32792   |                          |           |
|  |   | -                        |           |
|  | OFC - 8 District Asset Signet   |                          |           |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) | ered Agent. You must designate an individual or and                                 | other                    |           |
| The name and the Florida street address of the re  | egistered agent arc:  |                          |           |
| The name and the residue of the second   |   |                          |           |
| Gorken Mimioglu  |   |                          |           |
| Name   |   |                          |           |
| 7307 Sandscove Court, Suite  | <del></del>   |                          |           |
| Florida street address (P.O.   | Box NOT acceptable)   |                          |           |
| Winter Park  | FL <sup>32792</sup>   |                          |           |
| City   | Zip   |                          |           |
|  |   | _4_4_ <i>d 1</i> ;       | المماث    |
| Having been named as registered agent and to liability company at the place designated in  | accept service of process for the above this certificate. I hereby accept the apple | statea iim<br>ointment a | nea<br>Is |
| registered agent and agree to act in this capaci   | ity. I further agree to comply with the pr  | rovisions a              | of all    |
| statutes relating to the proper and complete p   | performance of my duties, and I am fami   | liar with a              | ind       |
| accept the obligations of my position as reg   | ristered agent as provided for in Chapter   | r 605, F.S.              |           |
|  |   |                          |           |
| C Jaku Mi  | land of the   |                          | gy.       |
| Registered Agent's Sign  | nature (REQUIRED)   | 22                       | .7<br>5,  |
|  |   |                          | ٠         |
| CONTIN   | TIED)   | 26 باللا 2               |           |
| (CONTIN  | (LD)  |                          |           |
|  |   | <u> </u>                 |           |
|  |   | Ç):                      |           |
|  |   | <u>ن</u><br>ن            |           |

The name and address of each person authorized to manage and control the Limited Liability Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager Gorken Mimioglu MGR 7307 Sandscove Court, Suite 7 Winter Park, FL 32792 (Use attachment if necessary) ARTICLE V: Other provisions, if any. The company elects to indemnify its members and managers to the fullest extent of applicable law. **REQUIRED SIGNATURE:** 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. Gorken Mimioglu, Member 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)

ARTICLE IV-