L21000390860

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
,
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Shakil added effective date
In A 4
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FL

2021 AUG 27 PM 12: 38

COVER LETTER

TO:	New Filing S Division of C					
SUB	JECT: M2NS L	LC				
* * -		(Name of Res	ulting Florid	a Limited C	Company)	_
			_		and fees are submitted to accordance with s. 605.	
Pleas	se return all corr	espondence concernin	g this matte	er to:		
Robe	rt J. Onda					
		(Contact Person)				
Onda	i, LaBuhn, Rankir	n & Boggs, Co., LPA				
		(Firm/Company)				
35 No	orth Fourth Street	, Suite 100				
		(Address)				
Colur	mbus, Ohio 4321	5				
	(1	City, State and Zip Code)				
rjo@d	olrblaw.com					
E-	mail Address: (to b	e used for future annual re	port notificat	ions)		
For f	urther informati	on concerning this ma	tter, please	call:		
Robe	ert J. Onda		at (61	4	716-0500	
	(Name of Conta	act Person)	_ `	. Code) (E	Daytime Telephone Number)	_
		for the following amou a bank located in the	•	-	essed by this office must	be payable in US
(\$25 f & \$12	50.00 Filing Fees for Conversion 5 for Articles ganization)	☐\$155.00 Filing Fees and Certificate of Status		Filing Fees ed Copy	•	
	Mailing Add New Filing S Division of C	ection		Nev	eet Address: w Filing Section vision of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

FILED
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SECRETARY OF STATE
TALLAHASSEE, FL

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: M2NS CORPORATION
(Enter Name of Other Business Entity)
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
First organized, formed or incorporated under the laws of
June 2, 2011 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
M2NS LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 9/3/21
(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.

Signed this <u>24th</u> day of <u>August</u>	_20 <i>41</i>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Robert J. Onda	Title: Authorized Representative
Signature(s) on behalf of Other Business Entity: [
Signature: Montroy Rend Printed Name: Montgomery T. Roach	
Printed Name: Montgomery T. Roach	Title: President
Signature:	
Signature:Printed Name:	_ Title:
Signature:Printed Name:	77.1
Printed Name:	I itle:
Signature:Printed Name:	Title
Printed Name:	
Signature:Printed Name:	Title
Frinted Name.	
Signature:Printed Name:	Title
Printed Ivame.	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabiting 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

	he Limited Liability Company is:	
M2NS LLC		
	(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II	- Address:	
The mailing a	ddress and street address of the principal office of the Limited I	Liability Company is:
Principal Off	ice Address: Mailing Address:	
16438 SW 2nd	Drive	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Pembroke Pine	es, Florida 33027	
(The Limited Liab	I - Registered Agent, Registered Office, & Registered Agentility Company cannot serve as its own Registered Agent. You must designate an indication ith an active Florida registration.)	ividual or another
(The Limited Liab business entity w	ility Company cannot serve as its own Registered Agent. You must designate an ind	ividual or another
(The Limited Liab business entity w	ility Company cannot serve as its own Registered Agent. You must designate an ind ith an active Florida registration.)	ividual or another
(The Limited Liab business entity w	ility Company cannot serve as its own Registered Agent. You must designate an ind ith an active Florida registration.) I the Florida street address of the registered agent are:	2021 AUG 27
(The Limited Liab business entity w	ility Company cannot serve as its own Registered Agent. You must designate an ind ith an active Florida registration.) I the Florida street address of the registered agent are: Andrew Mueller	2021 AUG 27
(The Limited Liab business entity w	ility Company cannot serve as its own Registered Agent. You must designate an ind ith an active Florida registration.) I the Florida street address of the registered agent are: Andrew Mueller Name	2021 AUG 27 PH 12: TALLAHAS SEE 1
(The Limited Liab business entity w	ility Company cannot serve as its own Registered Agent. You must designate an ind ith an active Florida registration.) I the Florida street address of the registered agent are: Andrew Mueller Name 16438 SW 2nd Drive	2021 AUG 27

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..

Registered Agent's Signature (REQUIRED)

and Mr_

(CONTINUED)

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.3	12	, ,		-	IV.	_

Robert J. Onda

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Montgomery T. Roach 2591 CR 137 Gatesville, Texas 76528
	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware then to the Department of State constitutes a third degree felorities.

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)

CONSENT OF CORPORATION TO USE OF NAME

I, the undersigned, do hereby certify that I am the Authorized Person of M2NS CORPORATION, incorporated under the laws of Florida by articles of incorporation dated the 2nd day of June, 2011, and pursuant to Section 605.0112 of the Florida Revised Limited Liability Act, I hereby consent to use of the name M2NS LLC, a limited liability company to be duly organized and existing under the laws of the State of Florida.

AUTHORIZED PERSON:

Montgan Rend Montgomery T. Roach, President

SECRETARY OF STAT