F37 000 378653

(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:

Office Use Only



000388368130

2022 HAY 25 PM 3: 49

THE CEIVED

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 5/25/2022

PRIORITY Routine

OUR REF # (Order ID#), Renee

ORDER ENTITY

Xator Corporation

PLEASE PERFORM THE FOLLOWING SERVICES:

Xator Corporation

Please file the attached conversion and subsquent articles of organization.

NOTES:

\$150.00 Authorized

Email address for annual report reminders: VIngram@reesbroome.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

1022 MAY 25 PM 3: 49

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.

(Einel Name of Other Bosin	ess Entity)
2. The "Other Business Entity" is a Corporation	
(Enter emity type. Example: corporation, limited p	partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws	of
April 14, 2005	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company	as set forth in the attached Articles of Organization:
Xator LLC	
(Enter Name of Florida Limited Liab	ility Company)
4. If not effective on the date of filing, enter the effecti (The effective date: Cannot be prior to date of recei	ve date: pt or filed date nor more than 90 calendar days after
the date this document is filed by the Florida Depar Note: If the date inserted in this block does not meet the applicab	rtment of State.)
document's effective date on the Department of State's records.	
document's effective date on the Department of State's records. 5. The plan of conversion has been approved in accord.	ance with all applicable statutes.
5. The plan of conversion has been approved in accord	to pay any members having appraisal rights the amount to

Signed this 25th day of May	2022 .			
Signature of Authorized Representative of Limit	ed Liability Company:			
Signature of Authorized Representative: Do	Tislo Manager			
Printed Name: David L. Scott	Title Worldger			
Signature(s) on behalf of Other Business Entity: [5]	See below for required signature(s)]			
Signature: DJL D				
Printed Name: David L. Scott	Title: President			
Signature:				
Printed Name:	Title:			
Signature:				
Signature: Printed Name:	Title:			
Signature:				
Signature: Printed Name:	Title:			
Signature:				
Printed Name:				
Signature:				
Printed Name:				
If Florida Corporation:	o.m			
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.				
	· ·			
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:		6 3	
All others: Signature of an authorized person.		4.03.1	2022 HAY 25	7
Fees:		38021		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	LUBELLANGE STATE	PM 3: 50	ED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:	
Xator LLC		
	ability Company, "L.L.C.," or "L.I.C.")	
ARTICLE II - Address: The mailing address and street address of th	e principal office of the Limited	d Liability Company is:
		• • •
Principal Office Address:	Mailing Address:	
1835 Alexander Bell Dr, Suite 210	1835 Alexander Bell Dr., Se	uite 210
Reston, VA 20191	Reston, VA 20191	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own lousiness entity with an active Florida registration.)	ered Office, & Registered Age Registered Agent. You must designate an	ent's Signature: individual or another
The name and the Florida street address of	the registered agent are:	
C T CORPORATION SYS	STEM	
<u> </u>	lame	
1200 SOUTH PINE ISLA	ND ROAD	
	(P.O. Box NOT acceptable)	
PLANTATION	FL 33324	
City	Zip	
Having been named as registered agent a liability company at the place designat registered agent and agree to act in this constantes relating to the proper and compaccept the obligations of my position and compaction.	ed in this certificate, I hereby ac apacity. I further agree to comp lete performance of my duties, a as registered agent as provided fo	cept the appointment as ly with the provisions of all and I am familiar with and for in Chapter 645, F.S
	Signature (REQUIRED)	25 E
Kathryn A. Widdo	es Assistant Secretary	
(CON	TINUED)	ED PH 3: 51 DE STATE

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	lom: Pfoiffer		
MGR	Jerry Pfeiffer 1835 Alexander Bell Dr. Suite 210		
	Reston, VA 20191		
MGR	David L. Scott		
	1835 Alexander Bell Dr, Suite 210		
	Reston, VA 20191		
CFO	Holly Freedlander		
	1835 Alexander Bell Dr, Suite 210		
	Reston, VA 20191		
			
(Use attachment if necessary)		2022 HAY	
			$\neg \neg$
ARTICLE V: Other provisions, if any.		MAY 25	
		77 P	$-\Pi$
		: /)	_ D
		3: 55	
<u>REQUIRED</u> SIGNATURE:		TT 05	
10 1,			
<u> </u>			

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.

Xator Holdings Corporation, Sole Member, by David L. Scott, President

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)