122000418592

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

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D. O'KEEFE SEP 2 8 2022



COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: STRATALYS RESEARCH	& CONSULTING L.L	L.C.	
(Name	of Resulting Florida L	Limited Company)	
		nization, and fees are submitted to convert an "npany" in accordance with s. 605.1045, F.S.	Other
Please return all correspondence conc	erning this matter	r to:	
Anthony Morales			
(Contact Person)	,		
MyUSACorporation.com			
(Firm/Company)			
1 Radisson Plaza, Suite 800			
(Address)		-	
New Rochelle, NY 10801			
(City, State and Zip C	Padu)		
info@myusacorporation.com	,out)		
E-mail Address: (to be used for future and	nual report notification	ons)	
	·		
For further information concerning th	is matter, please ca	call:	
Anthony Morales	at (_ <mark>877</mark>	330-2677	
(Name of Contact Person)	(Area Co	Code) (Daytime Telephone Number)	
Enclosed is a check for the following dollars and drawn on a bank located in		cks processed by this office must be payable ines)	ı US
□ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □\$155.00 Filing and Certificate of Status	Fees \$180.00 Fit and Certified	Filing Fees d Copy Certified Copy, and Certificate of Status	
Mailing Address:		Street Address:	
New Filing Section		New Filing Section	
Division of Corporations P.O. Box 6327		Division of Corporations	
1.O. DOX 0347		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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 Conversi STRATALYS RESEARCH & CONSULTING L.L.C.	ion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business.	s trust, etc.)
First organized, formed or incorporated under the laws of	
02/21/2001	,
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organ STRATALYS RESEARCH & CONSULTING L.L.C.	ization:
(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 date 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 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 ar which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	nount to
	2022 - T

Signed this 8th day of September	2022	
Signature of Authorized Representative of Lin	nited Liability Company:	
Signature of Authorized Representative: Printed Name: Jeffrey Hayes	Title: Member	
Signature(s) on behalf of Other Business Entity:		1
Signature: Printed Name: Jeffrey Hayes		
Frinted Name: Semey riayes (* 1)	Title: Member	
Signature: Printed Name:		_
Printed Name:	Title:	_
Signature:		
Printed Name:	Title:	-
Signature:		
Signature: Printed Name:	Title:	-
Signature: Printed Name:	Title:	-
Signature: Printed Name:	Title:	-
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer	-
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:	2022
All others: Signature of an authorized person.		2022 SEP 13 PM I
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)	PH 1: 43

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	13'. G		
The name of the Limited Lia	bility Company i	IS:	
STRATAL	YS RESEARCH 8	CONSULTING L.L.C.	
		ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and stre	et address of the	principal office of the Limit	ted Liability Company is:
Principal Office Address:		Mailing Address:	
495 Brickell Avenue #4804		495 Brickell Avenue #480	<u> </u>
Miami, FL 33131		Miami, FL 33131	
ARTICLE III - Registered (The Limited Liability Company cambusiness entity with an active Florida The name and the Florida st	not serve as its own Re a registration.)	gistered Agent. You must designate a	a individual or another
	Jeffrey	Hayes	
	Na	me	
_	495 Brickell A	venue #4804	
Florida	street address (P	O. Box NOT acceptable)	
	Miami	FL 33131	
	City	Zip	
liability company at the registered agent and agree statutes relating to the paccept the obligations	e place designated e to act in this cap roper and comple of my position as	d to accept service of process in this certificate, I hereby a pacity. I further agree to complete performance of my duties, or registered agent as provided signature (REQUIRED)	ccept the appointment as ply with the provisions of all and I am familiar with and
	(CONT	INUED)	F-1L 2022 SEP 13 JALLAHASS

ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:
"MGk" = Manager	
AMBR	Jeffrey Hayes
	1515 15th St NW #222
	Washington, DC, 20005
	
- , - ,	
•	
This document is executed in accordance	r an authorized representative of a member se with section 605.0203 (1) (b), Florida Statutes. I am aware tument to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document of the submitted in a d	te with section 605.0203 (1) (b), Florida Statutes. I am aware turnent to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document of the submitted in a d	re with section 605.0203 (1) (b), Florida Statutes. I am aware to urnent to the Department of State constitutes a third degree fellowers. Jeffrey Hayes
REQUIRED SIGNATURE: Signature of a member of this document is executed in accordance any false information submitted in a document of the submitted in a d	te with section 605.0203 (1) (b), Florida Statutes. I am aware turnent to the Department of State constitutes a third degree fel