L23000083669

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

Office Use Only



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02/07/22: 61947:-806 **150.00

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COVER LETTER

то:	New Filing Se Division of C					
SURI	IECT: ASAP Di	gital Forensics , LLC				
SOD	ECT	(Name of Res	sulting Florida Lin	nited Cor	npany)	
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.						
Please	e return all corre	espondence concernin	g this matter to	:		
Chris	Brett					
		(Contact Person)				
ASAP	Digital Forensics	LLC				
		(Firm Company)				
3937	S Jog Road #1					
		(Address)		_		
Green	acres FL 33467					
	((Tity, State and Zip Code)				
cpb26	i2@gmail.com					
E-r	nail Address: (to b	e used for future annual re	port notifications)	_		
For fi	irther informati	on concerning this ma	tter, please call	:		
Chris	Brett		_at (<u></u>	670-	5227	
	(Name of Conta	et Person)	(Area Cod	e) (Day	ytime Telephone Number)	
		or the following amou a bank located in the		proces	sed by this office must be payabl	e in US
(\$25 fd & \$12:	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filit and Certified C		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The 0 2415	et Address: Filing Section Sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	2023

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 8.605.1045. Florida Statutes.

2. The "Other Business Entity" is a S Corporation (Enter entity type: Example: corporation, limited partnership, general partnership, come	
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, t	he name of the country)
01/18/2022	
on (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Ar	rticles of Organization:
	14.7
ASAP Digital Forensics , LLC	
ASAP Digital Forensics , LLC (Enter Name of Florida Limited Liability Company)	<u></u> .

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.



Signed this 30th day of January	₂₀ <u>23 </u>
Signature of Authorized Representative of Lim	
Signature of Authorized Representative:	
Printed Name: Chris Brett	Title: President
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Signature:Chris Brott	Titu. President
Printed Name; Clins Breit	Hills: Flesioent
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Cimatura	
Signature:Printed Name:	Title:
Timed Name.	
<u>If Florida Corporation:</u>	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Ir	icorporator must sign.
If Florida General Partnership or Limited Liabil	ity Burtnerchin
Signature of one General Partner.	ny rattuersmp.
organization one deficial random	
<u>If Florida Limited Partnership or Limited Liabil</u>	ity Limited Partnership:
Signatures of ALL General Partners.	
4.11. 41	
All others: Signature of an authorized person.	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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ARTICLE 1 -	Name:			
The name of th	e Limited Liability Co	ompany is:		
ASAP Digital Fo	rensics , LLC			
		imited Liability	Company, "L.L.C.," or "LLC.")	
ARTICLE II -	- Addrace:			
		ss of the pri	ncipal office of the Limite	d Liability Company
15 ' ' 1 (5)(2*	. 11		N 112 A 1 A	
Principal Office	<u>ce Address:</u>		Mailing Address:	
3937 S Jog Roa			3937 S Jog Road #1	
Greenacres FL :	33467		Greenacre FL 33467	
ric name and	Chris Brett	ess or the re	gimeren agent ate.	
The name and	the Florida street addr	ress of the re	gistered agent are:	
	Chris Brett			
		Name		
	2027 S. Jog Bood			
	3937 S Jog Road	#1		
			Box NOT acceptable)	
			 -	
Haviva kaas	Florida street ac Greenacres	ity	FL ³³⁴⁶⁷ Zip	in the above stated b
liability co registered ag statutes rela	Florida street ac Greenacres C I named as registered of company at the place do gent and agree to act in ating to the proper and e obligations of my po.	ity agent and to esignated in this capacid complete position as reg	FL ³³⁴⁶⁷	cept the appointment ly with the provisions nd I am familiar with
liability co registered ag statutes rela	Florida street ac Greenacres C I named as registered of company at the place do gent and agree to act in ating to the proper and e obligations of my po.	ity agent and to esignated in this capacid complete position as reg	FL 33467 Zip accept service of process for this certificate. I hereby active I further agree to compart of my duties, and istered agent as provided for the service of the provided for the service of th	cept the appointment ly with the provisions nd I am familiar with

ARTICLE IV-

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

LE V: Other provisions, if any,	Jog Road #1	MGR" = Manager
(Use attachment if necessary) LE V: Other provisions, if any. Signature of a member or an authorized representative. This document is executed in accordance with section 605,0203 (1) (b), Florida any false information submitted in a document to the Department of State construction as provided for in s.817.155, F.S. CHUS BRET Typed or printed name of signee Filing Fees	Jog Road #1	
(Use attachment if necessary) LE V: Other provisions, if any. Signature of a member or an authorized representative. This document is executed in accordance with section 605.0203 (1) (b), Florida any false information submitted in a document to the Department of State constrast provided for in s.817.155, F.S. CHEIS BRET Typed or printed name of signee Filing Fees	Jog Road #1	
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Fining Fees	artment of State constitutes a third degree felo	any false information submitted in a docume
rinig rees		•
rinig rees	d name of signee	•
\$125.00 Filing Fee for Articles of Organization and Designati	<u>g rees</u>	•
	ion and Designation of Registered A 5.00 Certificate of Status (Optiona	CHRIS BR Type

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