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





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3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	03/21/2023	- a: DW
		Acc#I20160000072	4: () = W
Name:	HiTech Truss	, Inc.	
Document #:			
Order #:	14846360		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certified: \bigsim Plain: \bigsim COGS: \bigsim \bigsi		Email Address for Annual Report Notifications:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$	180.00	

Thank you!

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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.

HITECH TRUSS, INC. (Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Florida profit corporation	
2. The "Other Business Entity" is a	law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the us	ame of the country)
June 17, 2020 on	
(date of organization, formation or incorporation)	
and the second s	
3. The name of the Florida Limited Liability Company as set forth in the attached Article	es of Organization:
HITECH TRUSS, LLC	es of Organization:
HITECH TRUSS, LLC (Enter Name of Florida Limited Liability Company)	
HITECH TRUSS, LLC (Enter Name of Florida Limited Liability Company)	
HITECH TRUSS, LLC	calendar days after

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 17th day of March	2023 .		
Signature of Authorized Representative of Limit			
Signature of Authorized Representative:	nerm lignolet Title: Manager		
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]		
Signature: Manay Ray Reynolds	Title: Director		
Signature:Printed Name:	Title:		
Signature:Printed Name:	mu.		
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Signature:	m'a		
Printed Name:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C			
If Directors or Officers have not been selected, an Inc	corporator must sign.	202. SEC	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	BHAR 2	inere J
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:		
All others: Signature of an authorized person.		31,45	المحا
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

The name of the Limited I	Liability Company	is:	
HITECH TRUSS, LLC			
(Must contain	the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and st	treet address of the	principal office of the Limited	d Liability Company is:
Principal Office Address	i	Mailing Address:	
5800 Lakewood Ranch Blvd		5800 Lakewood Ranch Blv	d.
Sarasota FL 34240		Sarasota FL 34240	
business entity with an active Flor The name and the Florida	rida registration.) street address of the a Curran		adividual or another 2023 HAR 21
2001	Na akewood Ranch Blv.	ame	N21
		P.O. Box NOT acceptable)	岩岩 呈 1頁
Saraso	ita	FL 34240	
	City	Zip	1.11
-	0.1.)	Zip	

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	Michael Storey		
	5800 Lakewood Ranch Blvd.	<u>.</u>	
	Sarasota FL 34240		
MGR	Nancy Reynolds		
	5800 Lakewood Ranch Blvd.		
	Sarasota FL 34240		
MGR	Pamela Curran		
	5800 Lakewood Ranch Blvd.		
	Sarasota FL 34240		
		\$ 2	
	<u></u>		
		MAR HEAR	
			
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(Use attachment if necessary)		3. P	
(Use attachment if necessary)		21 / <u>₩</u>	
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TCLE V: Other provisions, if any.	pany is organized is: ANY AND ALL LAWFUL BUS	21 AH 10:55.	
TCLE V: Other provisions, if any. purpose for which this Limited Liability Comp	pany is organized is: ANY AND ALL LAWFUL BUS	21 AH 10:55.	1
TCLE V: Other provisions, if any. purpose for which this Limited Liability Comp		21 AH 10: 55.	The state of the s
TCLE V: Other provisions, if any. purpose for which this Limited Liability Comp		21 AH 10:55	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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TCLE V: Other provisions, if any. purpose for which this Limited Liability Comp REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aw	are that	* I
TCLE V: Other provisions, if any. purpose for which this Limited Liability Comp REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member	are that	S. S
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. Nancy Reynolds, Manager	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aw ment to the Department of State constitutes a third degree	are that	strong to the st
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. Nancy Reynolds, Manager	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awment to the Department of State constitutes a third degree	are that	, I see
REQUIRED SIGNATURE: Signature of a member or: This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. Nancy Reynolds, Manager Type	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aw ment to the Department of State constitutes a third degree	are that	, I Grand Market and Company of the