# 123000250996

(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:
special mendations to 1 ming officer.

Office Use Only



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05/48/23--01033--009 \*\*185.04

SECRETARY OF TIME

# **COVER LETTER**

TO: New Filing Section Division of Corporations					
SUBJECT: GovWare, LLC					
	Resulting Florida Lir	nited Con	npany)	-	
The enclosed Articles of Conversion, Ar Business Entity" into a "Florida Limited	_				
Please return all correspondence concern	ning this matter to	:			
Anthony R. Jimenez					
(Contact Person)		_			
(Firm/Company)		<del></del>			
220 Congress Park Drive, Suite 138					
(Address)					
Delray Beach, FL 33445		_		As 2	
(City, State and Zip Code contracts@microtech.net	e)				T
E-mail Address: (to be used for future annua	I report notifications				
				,,,, co (	
For further information concerning this r	matter, please call	;			, =
Anthony R. Jimenez	at ( <sup>703</sup>	)655-2	304	6: 29 	
(Name of Contact Person)	(Area Cod	e) (Day	time Telephone Number)	2.77 C	
Enclosed is a check for the following am dollars and drawn on a bank located in the	•	process	ed by this office must b	e payable in US	
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  ☐ \$150.00 Filing Fee and Certificate of Status	s S180.00 Filin and Certified Co		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New I Divisi The C 2415 I	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite assee, FL 32303	810	

# **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.

<ol> <li>The name of the "Other Business Entity" immediately prior to the filing of the Articl GovWare, LLC</li> </ol>	es of Conversion 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, commo	on law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the	
April 09, 2015	3 7
(date of organization, formation or incorporation)	7-B
3. The name of the Florida Limited Liability Company as set forth in the attached Arti	cles of Organization;
GovWare, LLC	
(Enter Name of Florida Limited Liability Company)	33
1. 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 9 he date this document is filed by the Florida Department of State.)	0 calendar days after
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date locument's effective date on the Department of State's records.	e will not be listed as the
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 amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

·		
Signed this 3th day of May	20 <u> 23</u>	
Signature of Authorized Representative of Li	mited Liability Company:	
Signature of Authorized Representative:	Tiple Manager	
Signature(s) on behalf of Other Business Entity	:  See below for required signature(s)	
Signature:		-
Printed Name: Anthony R. Jiprenez	Title: Manager	-
Signature:		
Printed Name:	Title:	-
Signature:Printed Name:		· \$20 13 .
Printed Name:	Title:	23 HAT 23 HAT
Signature:Printed Name:	Tide	50.00
		一一里
Signature:Printed Name:	Title	6:31
		••
Signature:Printed Name:	Title	
rinted Name.	Title.	
If Florida Corporation:	Of	
Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an		
If Florida General Partnership or Limited Liab	ility Partnership:	
Signature of one General Partner.	<del></del>	
If Florida Limited Partnership or Limited Liab Signatures of <u>ALL</u> General Partners.	ility Limited Partnership:	
Signatures of ALL General Partners.		
All others: 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)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

GovWare, LLC			
(Must c	contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addr	'ess:		
		principal office of the Limited L	iability Company is:
-			
Principal Office Add	dress:	Mailing Address:	
220 Congress Park Driv	ve	220 Congress Park Drive	
Suite 138		Suite 138	
ARTICLE III - Regi	istered Agent, Registe	Delray Beach, FL 33445  red Office, & Registered Agent's egistered Agent. You must designate an indiv	
The Limited Liability Comp business entity with an activ	istered Agent, Registe	red Office, & Registered Agent'	ridual or another
ARTICLE III - Regi The Limited Liability Comp business entity with an activ The name and the Flo	istered Agent, Registe cany cannot serve as its own Reve Florida registration.) orida street address of the onthony R. Jimenez	red Office, & Registered Agent' egistered Agent' on indivine registered agent are:	ridual or another
ARTICLE III - Regi The Limited Liability Comp business entity with an activ The name and the Flo	istered Agent, Registe cany cannot serve as its own Reve Florida registration.) orida street address of the onthony R. Jimenez	red Office, & Registered Agent'	ridual or another  23 MAY SEGRET
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ARTICLE III - Regi The Limited Liability Comp business entity with an activ The name and the Flo  Ar	istered Agent, Registe cany cannot serve as its own Reve Florida registration.) orida street address of the nthony R. Jimenez Na 20 Congress Park Drive,	red Office, & Registered Agent? egistered Agent. You must designate an indivine registered agent are:	23 MAY -8 AM SECRE LANGE OF TALLAHASSEE AM
ARTICLE III - Regi The Limited Liability Comp business entity with an activ The name and the Flo  Ar  22	istered Agent, Registe cany cannot serve as its own Reve Florida registration.) orida street address of the nthony R. Jimenez Na 20 Congress Park Drive,	red Office, & Registered Agent? egistered Agent. You must designate an indivine registered agent are:  ame	23 MAY -8 SECRE (AS) TALLAHASSE

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..

(CONTINUED)

#### ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Anthony R. Jimenez
Mort	220 Congress Park Drive, Suite 138
	Delray Beach, FL 33445
(Use attachment if necessary)	28.88 - <b>3</b>
CLE V: Other provisions, if any.	6.
REQUIRED SIGNATURE:	
	<i>i</i>

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.

Anthony R. Jimenez

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)