

W23000285686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

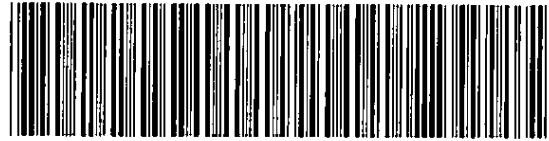
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W23-62075

Office Use Only



500406668565

W  
6/14/28

RECEIVED

2023 APR 28 PM 2:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

2023 APR 28 PM 11:16

SECRETARY OF STATE  
TALLAHASSEE, FL

**Sunshine State Corporate Compliance Company**

3458 Lakeshore Drive, Tallahassee, Florida 32312  
(850) 656-4724

DATE 04/28/2023

**\*\*WALK IN\*\***

ENTITY NAME World Source Integration, LLC

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$150

ACCOUNT #: I20160000072

*S. R. H.*

Please call Tina at the above number for any issues or concerns. Thank you so much!



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 28, 2023

SUNSHINE

**CORRECTED**  
Please Allow For  
Same File Date

SUBJECT: WORLD SOURCE INTEGRATION, LLC  
Ref. Number: W23000062075

We have received your document for WORLD SOURCE INTEGRATION, LLC. However, the document has not been filed and is being returned for the following:

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace  
Regulatory Specialist II

Letter Number: 323A00009607

FILED  
2023 JUN 23 AM 7:08  
TALLAHASSEE, FLORIDA  
RECEIVED  
2023 JUN 14 PM 3:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  
WORLD SOURCE INTEGRATION, INC.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a CORPORATION  
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of ILLINOIS  
(Enter state, or if a non-U.S. entity, the name of the country)

on 03/13/2021  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
WORLD SOURCE INTEGRATION, LLC

(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 days after 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 as the 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 amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

FILED  
2023 MAR 23 AM 7:08  
CLERK OF THE  
STATE  
OF FLORIDA

Signed this 28 day of October 2022.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: Ben S. Wilson  
Printed Name: Ben S. Wilson Title: Secretary

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: Ben S. Wilson  
Printed Name: BEN S. WILSON Title: SECRETARY

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability 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)

2023 OCT 28 AM 7:08  
STATE  
OFF

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

WORLD SOURCE INTEGRATION, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

2222 RICKENBACKER PKWY W  
COLUMBUS, OH, 43217

### Mailing Address:

2222 RICKENBACKER PKWY W  
COLUMBUS, OH, 43217

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

URS AGENTS, LLC

Name

3458 LAKESHORE DRIVE

Florida street address (P.O. Box **NOT** acceptable)

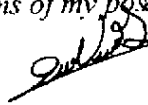
TALLAHASSEE

FL 32312

City

Zip

*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.*



Georgina Vega, Asst. Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 APR 28 11:17  
FRI

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Ben S. Wilson

2222 RICKENBACKER PKWY W.

COLUMBUS, OH, 43217

AMBR

Jim M. DiSanto

2222 RICKENBACKER PKWY W

COLUMBUS, OH, 43217

AMBR

Samuel W. Grooms

2222 RICKENBACKER PKWY W

COLUMBUS, OH, 43217

AMBR

Donnie R Johnson

2222 RICKENBACKER PKWY W

COLUMBUS, OH, 43217

(Use attachment if necessary)

**ARTICLE V:** Other provisions, if any.

**REQUIRED SIGNATURE:**

**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.

Ben S. Wilson, Secretary

*Ben S. Wilson*

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)**

2024 APR 26 AM 11:11  
SECRETARY OF STATE  
FLORIDA