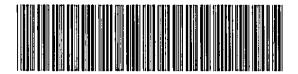
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	(Requestor's Name)			
·	(Address)	<u> </u>		
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	(Crty/State/Zip/Phone #)	1		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				

Office Use Only



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## **CT CORP**

# (850) 656- 4724

### 3558 lakesore Drive Tallahassee, FL 32312

08/17/2023

Da	Acc#120160000072
	Acc#I20160000072
Name:	Advanced IT Concepts, LLC
Document #:	
Order #:	15085823 - 1
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: ✓  Plain:  COGS: ✓  Email Address for Annual Report Notifications:  Gabriel.Ruiz@aitcinc.com
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount: \$ 185.00

Thank you!

#### **COVER LETTER**

Action Control

TO: New Filing Section Division of Corporations		
·		
SUBJECT: Advanced IT Concepts, LLC	of Resulting Florida Lim	imited Company)
(ivaine	of Resulting Florida Em.	anned Company)
	-	zation, and fees are submitted to convert an "Ot vany" in accordance with s. 605.1045, F.S.
Please return all correspondence conc	erning this matter to:	to:
Robert Isaacson		
(Contact Person)	•	<del></del>
Nixon Peabody LLP		
(Firm/Company)		<del></del>
Exchange Place, 53 State Street		
(Address)		<del></del>
Boston, MA 02109		
(City, State and Zip C	lode)	<del></del>
Gabriel.Ruiz@aitcinc.com		
E-mail Address: (to be used for future and	nual report notifications)	is)
For further information concerning th	is matter, please call:	ill:
Robert Isaacson	at ( <u>617</u>	345-1000
(Name of Contact Person)	(Area Code	ode) (Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located in		ks processed by this office must be payable in U
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing and Certificate of Status	Fees S180.00 Filin and Certified Co	<del>-</del>
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## <u>Articles of Conversion</u>

And the second

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 C Advanced IT Concepts, Inc.	Conversion is:
(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 o	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law o	r business trust, etc.)
First organized, formed or incorporated under the laws of	of the country)
June 22, 2006	•
on	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of	f Organization:
Advanced IT Concepts, 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 cales 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 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 right which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	nts the amount to
	<del></del>

Signed this 17th day of August	_ 20_23			
Signature of Authorized Representative of dimitted Liability Company:				
Signature of Authorized Representative: Gabriel Printed Name: Gabriel Ruiz	Kury 1940/486c: <u>Manager</u>			
Signature(s) of the Business Entity:   Gabril Rug				
Signature:	Title: President			
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: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)			