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09/14/23--01007--006 **185.00

07/05/23--01033--028 **150.00

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COVER LETTER

Division of C					
SUBJECT:	TEK U	LLC	nnany)		
	((value of ices	uning Frontia Emmed Cor	inputty /		
		-	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.		
Please return all corre	espondence concerning	g this matter to:			
	SIDDA B. (Contact Person)				
TTEK	(Firm/Company)				
2672	MEAD AV	ENUE			
SAINT C desaigen	MEAD AV (Address) LOOD F Tity, State and Zip Code) O Qmail e used for future annual re	L 34771 Com			
	e used for future annual reponsion concerning this mat				
_	-		60 - 1940 time Telephone Number)		
Enclosed is a check t		nt: (All checks proces	sed by this office must be payable in US		
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	■S185.00 Filing Fees, Certified Copy, and Certificate of Status		
<u>Mailing Add</u> New Filing S		·	t Address: Filing Section		
Division of C			Division of Corporations		
P.O. Box 632		The C	Centre of Tallahassee		

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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

Statutes.		
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles 7 TEK LLC	of Cor	iversion is:
7 TEK LLC (Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a <u>LIMITED LIABILITY COMPE</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common	aw or bi	asiness trust, etc.
First organized, formed or incorporated under the laws of MARYLAND, USA (Enter state, or if a non-U.S. entity, the in	ame of th	ne country)
on $\frac{09/21/2012}{\text{(date of organization, formation or incorporation)}}$		
3. The name of the Florida Limited Liability Company as set forth in the attached Articl	es of O	rganization:
7 TEK 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 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 vidocument's effective date on the Department of State's records.		
5. The plan of conversion has been approved in accordance with all applicable statutes.		
 The "Converted or Other Business Entity" has agreed to pay any members having appraisal which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	l rights	the amount to
	Ē	2022 JI

Signed this 26 day of AUGUST	20_23
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	Title: PRESIDNI/CEO
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)}
Signatura Company	
Signature: DESAL SIDDABDIHUCA	Title: Praident/CED
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Signature	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or (Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
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

ARTICLE I - Name: The name of the Limited Liability Company is:	
TTEK 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 Co	ompany is:
Principal Office Address: Mailing Address:	
2672 Mead Avenue 6030 DAY break Circle St. Claud FL 34771 STEAISO 270 Clauses ville, MD 21029	- !
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatur (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or anot business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	
DESAT SIDDABATHULA	
2672 MEAD AVENUE Florida street address (P.O. Box NOT acceptable)	
Saint Cloud FL 3477) City Zip	
Having been named as registered agent and to accept service of process for the above s liability company at the place designated in this certificate, I hereby accept the appor registered agent and agree to act in this capacity. I further agree to comply with the pro statutes relating to the proper and complete performance of my dutics, and I am famili accept the obligations of my position as registered agent as provided for in Chapter	intment as ovisions of all ar with and
Spesas	2022
Registered Agent's Signature (REQUIRED)	بالا
	<u>-</u> 5

(CONTINUED)

A	R	TI	C1		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	DESAI SIDDABATHULA 2672 Mead Avenue Saint Cloud, EL, 34771			
				
(Use attachment if necessary)				
ARTICLE V: Other provisions, if any.				
REQUIRED SIGNATURE:	rai.			
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony			
Тур	DABATHULA = ☆ ped or printed name of signee			
\$ 30.00 Certified Copy (Option:	d) \$ 5.00 Certificate of Status (Optional)			
	; ;			