

L23000442899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

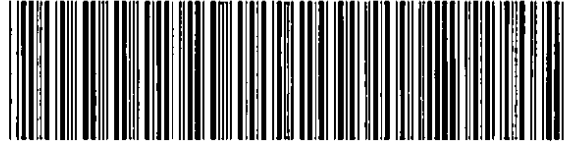
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900415490819

09/12/23--01033--004 **185.00

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2023 SEP 12 AM 11:21
STATE
OFFICE

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: MONITEK L.L.C.
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

OEZGUER AKSOY
(Contact Person)

MONITEK L.L.C.
(Firm/Company)

1300 S MIAMI AVE, UNIT 3705
(Address)

MIAMI, FL 33130
(City, State and Zip Code)

OAKSOY@MONITEK.US
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

OEZGUER AKSOY at (401) 219 5706
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☐ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☒ \$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

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
MONITEK L.L.C.

(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, common law or business trust, etc.)

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

on 10/15/2019
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
MONITEK L.L.C.

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: 09/05/2023

(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.



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Signed this 5 day of SEPTEMBER 2023

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]

Printed Name: Oezguer AKSOY Title: PRESIDENT

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

Signature: [Signature]

Printed Name: Oezguer AKSOY 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:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MONITEK L.L.C.

(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:

1300 S MIAMI AVE

UNIT 3705

MIAMI, FL 33130

Mailing Address:

1000 BRICKELL AVE

SUITE #715 PMB 316

MIAMI, FL 33131

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:

OEZGUER AKSOY

Name

1300 S MIAMI AVE, UNIT 3705

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

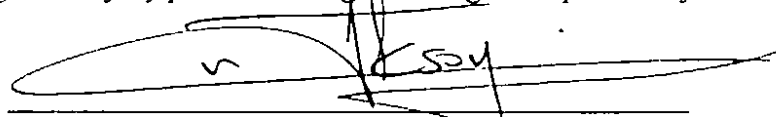
MIAMI

FL 33130

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

OEZGUER AKSOY

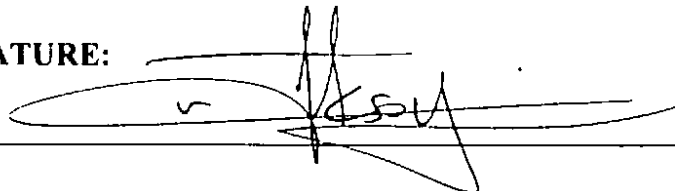
1300 S MIAMI AVE, UNIT 3705

MIAMI, 33130 FL

(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.

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)



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee \$150.00

Pursuant to the provisions of RIGL 7-16, the following Articles of Organization are adopted for the limited liability company to be organized hereby:

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R.I. DEPT. OF STATE
BUSINESS DIV
2019 OCT 15 A 9:58

1. The name of the limited liability company is:		
MONITEK L.L.C.		
2. The name and address of the initial resident agent/office in Rhode Island is:		
Agent Name OZGUR AKSOY		
Street Address (NOT a P.O. Box) 5 SPARROW LANE		
City/Town EAST GREENWICH	State RHODE ISLAND	Zip Code 02818
3. Under the terms of these Articles of Organization and any written operating agreement made or intended to be made the limited liability company is intended to be treated for purposes of federal income taxation as (CHECK ONE BOX):		
<input type="checkbox"/> partnership or		
<input type="checkbox"/> a corporation or		
<input checked="" type="checkbox"/> disregarded as an entity separate from its member(s)		
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:		
Street Address 5 SPARROW LANE		
City/Town EAST GREENWICH	State RI	Zip Code 02818
5. The limited liability company has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with RIGL 7-16, unless a more limited purpose or duration is set forth in Section 6 of these Articles of Organization.		

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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FORM 400 - Revised 01/2019



Rhode Island Department of State

Gregg M. Amore

Secretary of State

HOME

BUSINESS SERVICES

ELECTIONS

CIVICS AND EDUCATION

Entity Summary

ID Number: 001700926

Request certificate

New search

Summary for: **MONITEK L.L.C.**The exact name of the Domestic Limited Liability Company: **MONITEK L.L.C.**

Entity type: Domestic Limited Liability Company

Identification Number: 001700926

Date of Organization in Rhode Island: 10-15-2019

Effective Date: 10-15-2019

The location of the Principal Office:

Address: 5 SPARROW LANE

City or Town, State, Zip, Country: EAST GREENWICH, RI 02818 USA

The mailing address or specified office:

Address: 5 SPARROW LANE

City or Town, State, Zip, Country: EAST GREENWICH, RI 02818 USA

Agent Resigned: N

Address Maintained: Y

The name and address of the Resident Agent:

Name: OEZGUER AKSOY

Address: 5 SPARROW LANE

City or Town, State, Zip, Country: EAST GREENWICH, RI 02818 USA

The limited liability company is to be managed by its Members

The name and business address of each Manager:

Title	Individual name	Address
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Purpose:

CONSULTANCY AND MANAGEMENT SERVICES FOR ELECTRONICS HARDWARE/SOFTWARE AND BUSINESS DEVELOPMENT.

North American Industry Classification System Code(NAICS):

541690 Other Scientific and Technical Consulting Services

View filings for this business entity:

ALL FILINGS

Annual Report

Annual Report - Amended

Annual Report - Reinstatement

Annual Reports - Prior to 2006

[Click here to access 2006 and 2007 annual reports filed prior to July 25, 2007. The corporate ID is required.](#)



State of Rhode Island
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2023

1. ID No. 001700926

2. Exact Name of the Limited Liability Company MONITEK L.L.C.

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity.
Download the list of codes [here](#) More information on [NAICS](#) can be found online.

541690

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

CONSULTANCY AND MANAGEMENT SERVICES FOR ELECTRONICS
HARDWARE/SOFTWARE AND
BUSINESS DEVELOPMENT

5. Principal Office Address

No. and Street: 5 SPARROW LANE
City or Town: EAST GREENWICH State: RI Zip: 02818 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:
No. and Street: 5 SPARROW LANE
City or Town: EAST GREENWICH State: RI Zip: 02818 Country: USA

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PM 11:22

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**The State of Rhode Island and
Providence Plantations**Date: Tuesday,
August 04, 2020**PAYMENT CONFIRMATION**

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If you have any questions or concerns you may contact our office at (401) 222-3040 or e-mail our support desks. For Corporate Filing issues and/or concerns contact corp_tech@sos.ri.gov. For UCC Filings issues and/or concerns contact ucc_tech@sos.ri.gov.

If you have any questions regarding your payment information, please contact RI.gov at rihelp@nicusa.com or call 1-401-831-8099.

Confirmation DateTime	8/4/2020 12:12:46 PM
Confirmation Number	690285
Transaction Id	1977602
Filing Type	Domestic Limited Liability Company
Filing	Statement of Change of Registered/Resident Agent
FilingInfo	MONITEK L.L.C.
Filing Fee	\$20.00
Enhanced Access Fee	\$2.00
Total Fee	\$22.00

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SECRETARY OF STATE
CORPORATE FILING