# 124000034085

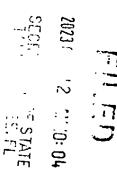
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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# COVER LETTER

TO: New Filing Sec Division of Co				eta.			
SUBJECT: MSA SCR	EENING LLC	uite <b>app</b>		•:	•.		
SUBJECT:	(Name of Resu	lting Florida Limite	d Compa	ny)			
The enclosed Articles Business Entity" into	of Conversion. Article a "Florida Limited Lia	es of Organizatio bility Company	n, and f	ices are submitted to coordance with s. 605.10	onvert an 945, F.S.	"Othe	:r
Please return all corre	spondence concerning	this matter to:					
MARIO BARBIS AGUIL	AR						
	(Contact Person)						
	(Firm/Company)						
2278 MISTLETO LN							
	(Address)						
NORTH PORT, FL 342							
	City, State and Zip Code)						
basant@ashuinsuranc		nor notifications)					
	e used for future annual re						
For further information	on concerning this ma						
MARIO BARBIS AGUI			)219-96		_		
(Name of Conta				me Telephone Number)			_
Enclosed is a check f dollars and drawn on	or the following amou a bank located in the	int: (All checks p United States)	rocesse	d by this office must b	oe payabl	e in U	S
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Cop	y	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee.	ection Corporations 27		New Fi Division The Ce 2415 N	Address: iling Section on of Corporations entre of Tallahassee I. Monroe Street, Suite assee, FL 32303	SEC. STATE	2023 6 12 28 8:44	

## **Articles of Conversion**

For

### "Other Business Entity"

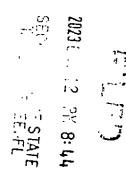
Into

### 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:  MSA SCREENING, 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 (Enter state, or if a non-U.S. entity, the name of the country)
10/11/2017
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MSA SCREENING 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.



Signed this 5TH day of OCTOBER	_ 20
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative:	
Printed Name: MARIO BARBIS AGUILAR	Title: MGRM
Printed Name; MARIO BARBIS AGGICAN	Title: institution
Signature(s) on behalf of Other Business Entity: [5	See below for required signature(s)]
The second secon	
Signature:	THE PRESIDENT
Printed Name MARIO BARBIS AGUILAR	Title: FRESIDENT
Signature:	
Printed Name:	Title:
Signature:Printed Name:	417.3
Printed Name:	_ 1 itie:
Signature:	
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Tido
Printed Name:	Title.
Signature:	
Signature:Printed Name:	Title:
ICEL 11 Companies	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or 0	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership;
Signatures of ALL General Partners.	
<u></u>	
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( ... 12 7/ 8:44 SEC. E.FL

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABII	LITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:		
MSA SCREENING LLC (Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited I	Liability Company is:
Principal Office Address:	Mailing Address:	
2278 MISTLETO LN NORTH PORT, FL 34286	2278 MISTLETO LN NORTH PORT, FL 34286	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	d Office, & Registered Agen stered Agent. You must designate an ind	t's Signature: lividual or another
The name and the Florida street address of the	registered agent are:	
MARIO BARBIS AGUILAR		
Nam	e	
2278 MISTLETO LN		
Florida street address (P.C	). Box <u>NOT</u> acceptable)	
NORTH PORT	FI_ 34286	
City	Zip	
Having been named as registered agent and the liability company at the place designated is registered agent and agree to act in this capaestatutes relating to the proper and complete accept the obligations of my position as re	n this certificate, I hereby acce city. I further agree to comply performance of my duties, and	ept the appointment as with the provisions of all AL am familiar with and
Registered Agent's Sig	gnature (REQUIRED)	2023 SEC
(CONTII	NUED)	
		8: 44 STATE E. FL

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGRM	MARIO BARBIS AGUILAR		
	2278 MISTLETO LN		
	NORTH PORT, FL 34286		
(Use attachment if necessary)			
ICLE V: Other provisions, if any.			
REQUIRED SIGNATURE:			
- 137			
Signature of a member of	r an authorized representative of a member se with section 605.0203 (1) (b), Florida Statutes, I am aware t		
any false information submitted in a doc as provided for in s.817.155, F.S.	nument to the Department of State constitutes a third degree fel		

Typed or printed name of signee

Filing Fees

ARTICLE IV-

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)