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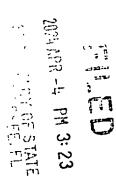
(Re	equestor's Name)
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
	74	





200426799832

84/04/24--01002--008 ++180.00



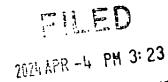
T. MATTHEWS APR 16 2024



COVER LETTER

TO:	New Filing Son Division of C					
SURIE	SKY Mor	nitor GPS Americas LLC				
30D0		(Name of Res		lorida Lim	ited Corr	npany)
						d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	return all corre	espondence concernin	g this n	natter to:		
Anthon	y Morales				_	
		(Contact Person)			_	
MyUSA	Corporation.cor	m				
		(Firm/Company)			_	
1 Radis	son Plaza, Suit	e 800				
		(Address)			-	
New Ro	ochelle, NY 108	01				
	((City, State and Zip Code)			_	
info@m	yusacorporatio	n.com				
E-ma	ail Address: (to b	e used for future annual re	port noti	fications)	_	
For fur	ther information	on concerning this ma	tter, plo	ease call:		
Anthony	y Morales		at (377	330-	2677
	(Name of Conta	et Person)		Area Code) (Day	time Telephone Number)
		or the following amou a bank located in the	•		process	ed by this office must be payable in US
(\$25 for	0.00 Filing Fees Conversion for Articles nization)	☐\$155.00 Filing Fees and Certificate of Status		30.00 Filing ertified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Addr New Filing So Division of C P.O. Box 632 Tallahassee, H	ection orporations 7			New F Divisi The C 2415 I	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303

Articles of Conversion For "Other Business Entity"



Into
Florida Limited Liability Company
SSEE, FL

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: SKY Monitor GPS Americas LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(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)
02/01/2021 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SKY Monitor GPS Americas 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 26th da	of March	20 <u>24</u>			
Signature of Authorized Representative of Limited Liability Company:					
Signature of Authorized I Printed Name: Michael Sou	epresentative:	Title: Member			
Signature(s) on behalf of	Other Business Entity:	[See below for required signature(s)]			
Signature: Printed Name: Michael Sou	herland	Title: Member			
		~			
Signature:Printed Name:		Title:			
Signature:Printed Name:	· <u> </u>	Title:			
Signature:					
		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 Conver Fees for Florida A Certified Copy: Certificate of State	rticles of Organization:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED FABILIFY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: The same of the Limited Liability Company is:

ARTICLE I - Name: The name of the Limited Liability Company is:	2024 APR -4 PM 3: 23
SKY Monitor GPS Americas LLC	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7143 State Road 54 #230	7143 State Road 54 #230
New Port Richey, FL 34653	New Port Richey, FL 34653
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	ered Agent. You must designate an individual or another
Incorp Services, Inc.	
Name	

Name

3458 Lakeshore Drive
Florida street address (P.O. Box NOT acceptable)

Tallahassee

Tallahassee

Tallahassee

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)

	TYT	ГT	~		T 7 7
Δ	K i		6 1	H.	IV-

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

<u>Title:</u>				
"AMBR" = Authorized Member				
"MGR" = Manager				
AMBR	Michael Southerland			
	7143 State Road 54 #230			
	New Port Richey, FL 34653			
				
(Use attachment if necessary)				
(220 0000000000000000000000000000000000				
`\				
CLE V: Other provisions, if any.				
provisions, many.				
REQUIRED SIGNATURE:				
MEQUINED SIGNATURE.				
	<u> </u>			
Signature of a manches on				
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware tha			
any false information submitted in a docu	ment to the Department of State constitutes a third degree felor			
as provided for in s.817.155, F.S.				
	Michael Southerland			
Ту	ped 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)

SPECIAL AND REVOCABLE LIMITED POWER OF ATTORNEY

TO ALL PERSONS, be it known, that INCORP SERVICES, INC., a Nevada corporation ("Grantor"), does hereby make and grant a limited and specific power of attorney to Anthony Morales and appoint and constitute said individual as its attorney-in-fact ("Attorney-in-Fact"). This Special and Revocable Limited Power of Attorney hereby revokes any and all former powers of attorney given by Grantor to Attorney-in-Fact.

Attorney-in-Fact shall have the limited power and authority to undertake, commit and perform only the following acts on Grantor's behalf to the same extent as if Grantor had done so personally, all with full power of substitution and revocation in the presence:

Authority to accept appointment as registered agent on behalf of Grantor, for entities which MyUSACorporation.com, a Wyoming corporation, has purchased resident agent service on or through their account with Grantor. After each exercise of such authority, Attorney-in-Fact shall notify Grantor of the same.

TERMINATION: Unless sooner revoked or terminated by Grantor, this Special and Revocable Limited Power of Attorney shall become NULL and VOID from and after December 31st, 2024.

Davis		Dated: January 9 th , 2024
Louise Breytenbach, Chie	f Operating Officer	• •
STATE OF NEVADA)	
COUNT OF CLARK) ss)	

This Special and Revocable Limited Power of Attorney was acknowledged before me on January 9th, 2024, by Louise Breytenbach, as Chief Operating Officer of InCorp Services, Inc., a Nevada corporation.

Notary Public in the State of Nevada

My Commission Expires: June 10+2025

