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(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sources Entry Warre)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ALL STATE TRAFFI	C SOLUTION	NS LLC	[
Please Debit FCA00000	00003 For: 150						
Thank you Seth Neeley	<i>(</i>				_		
Staff				Art of Inc. File	•	202	
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Walk-In	Will Pick Up		—	Courier			

COVER LETTER

Division of Corp	orations					
SUBJECT: ALL STATE	TRAFFIC SOLUTI	ONS LLC				
SUBJECT: ALL STATE	(Name of R	esulting Florida L	imited Co	ompany)	_	
The enclosed Articles of Business Entity" into a "		_				
Please return all correspo	ndence concerni	ng this matter to	o:			
MATTHEW MAZZILLI						
(C	ontact Person)					2024 J
(F	irm/Company)					
2980 NE 80TH AVE					<u>ن</u> .	23 23
	(Address)					
OKEECHOBEE, FL 34972					<u>-</u> ''	ć
(City, S	State and Zip Code)		_		, - , - 1	ţ,7
E-mail Address: (to be used	for future annual re	port notifications)	_			
For further information co	ncerning this ma	tter, please call	:			
MICHELE RODRIGUEZ	_	772	、460-G	6786		
(Name of Contact Pers	son) _	ar ((Area Cod) e) (Day	6786 rtime Telephone Number)		
Enclosed is a check for the dollars and drawn on a bar	following amou	int: (All checks			payable	in US
	55.00 Filing Fees Certificate of s			☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Address: New Filing Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	ations		New F Division The Co 2415 N	Address: Ciling Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 8	10	
			Tallaha	assee, FL 32303		

TO: New Filing Section

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 AIR & METAL SYSTEMS INC	of Con	version i	is:
(Enter Name of Other Business Entity)	,	=	£2-2
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common la		23	Linus
(Enter entity type. Example: corporation, limited partnership, general partnership, common la	w or bus	siness trus	il, elc.
First organized, formed or incorporated under the laws of	_"1,-	<u></u>	د ر ۱ ۱۱۱۳ - ۱
(Enter state, or if a non-U.S. entity, the name	ne of the	country)	
02/25/2015	(4)	~	
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Articles	of Or	g aniz ati	ion:
ALL STATE TRAFFIC SOLUTIONS 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 non more than 90 cathe date this document is filed by the Florida Department of State.)	ilendar	· days a	fter
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will locument's effective date on the Department of State's records.	l not be l	listed as th	ne
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 21st day of June	20 24		
Signature of Authorized Representative of Lin	mited Liability Company:		
Signature of Authorized Representative: Market Printed Name: Market Mark	- £	_	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature: Maria Maria	NA OF	_	
Printed Name: Matheway Mazz	Title: YOUGU	_	
Signature:		<u></u>	
Signature: Printed Name:	Title:	_	
Signature:		_	
Signature: Printed Name:	Title:	-	
Signature:		_	
Signature:Printed Name:	Title:	- -	2021
Signature:		;	ii) h
Signature:Printed Name:	Title:		27.2
Signature:	Title:		£11 9: 1;
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or		75 () 19	i: 1,7
If Directors or Officers have not been selected, an In	ncorporator must sign.		
If Florida General Partnership or Limited Liabil. Signature of one General Partner.	ity Partnership:		
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ity Limited Partnership:	•	
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)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company	is:	
ALL STATE TRAFFIC SOLUTIONS LLC		
(Must contain the words "Limited Linb	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited	l Liability Company is:
Principal Office Address:	Mailing Address:	
2980 NE 80TH AVE OKEECHOBEE, FL 34972	2980 NE 80TH AVE OKEECHOBEE, FL 34972	
ADDICE DITT. Decision of Asset Decision		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regional business entity with an active Florida registration.)	ed Office, & Registered Ager istered Agent. You must designate an in	nt's Signature:
The name and the Florida street address of the		25 /81
ousiness early with an active Posted registration.	registered agent are:	nt's Signature: Signat
The name and the Florida street address of the MATTHEW MAZZILLI Nam 2980 NE 80TH AVE	registered agent are:	25 M19:4
The name and the Florida street address of the MATTHEW MAZZILLI Nam	registered agent are:	25 MI 9:1,

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 Synature (REQUIRED)

(CONTINUED)

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$\mathbf{A}\mathbf{R}$	TI	$C\Gamma$	Æ.	IV.

Title

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

MATTHEW MAZZILLI	
2980 NE 80TH AVE	
OKEECHOBEE, FL 34972	
PATRICIA MAZZILLI	
2980 NE 80TH AVE	
OKEECHOBEE, FL 34972	
	•
	
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	FIN 19.1.7
	~
	<u> </u>
	OKEECHOBEE, FL 34972 PATRICIA MAZZILLI

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.

MATTHEW MAZZILLI

Typed or printed name of signee