

L25000013518

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

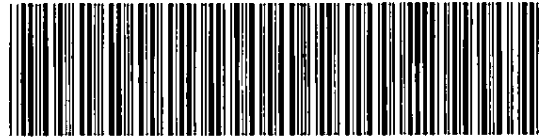
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



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01/06/25--01012--006 **190.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1/30/2024

To whom it may concern,

I filled out the wrong incorporation paperwork on October 2, 2024 under document number L2400042p073, I dissolved the corporation on 12/30/24 and I have included the payment confirmation. If you have any questions my direct number is 732-547-8807.

M. Less

Matthew J Less

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TALLAHASSEE, FLORIDA

Tyler Payments Services

Payment Receipt Confirmation
Your payment was successfully processed.

Transaction Summary		Receipt Confirmation
Description		Amount
Total Payment To Division of Corporations		\$25.00
Service Fee		\$0.00
Total Amount Paid		\$25.00

Transaction Detail				
SKU	Description	Unit Price	Quantity	Amount
400441789744 L24000426073	Dissolution of Limited Liability Company	\$25.00	1	\$25.00
	Service Fee	\$0.00		\$0.00
Total Amount Paid				\$25.00

Customer Information			
Customer Name	matthew hess	Receipt Date	12/30/2024
Local Reference ID	400441789744 L24000426073	Receipt Time	01:51:35 PM EST

Payment Information			
Payment Type	Credit Card	Credit Card Number	*****7601
Credit Card Type	VISA	Order ID	171174156
		Name on Credit Card	matthew hess

Billing Information	
Billing Address	360 Central Ave
Billing City, State	Saint Petersburg, FL
Billing Zip/Postal Code	33701
Country	US

Visit tylertech.com/mtd for license information and disclosures.
NIC Services, LLC dba Tyler Payments Services ● 7701 College Boulevard, Overland Park, KS 66210 ● (888) 852-0663
NIC Payment Solutions in Hawaii, New Jersey & Wisconsin

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TALLAHASSEE FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Commercial Drying Research Institute LLC
(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:

Matthew J Hess

(Contact Person)

Commercial Drying Research Institute LLC
(Firm/Company)

360 Central Ave, Suite 800
(Address)

St Petersburg FL 33701
(City, State and Zip Code)

mjhess@cdlcompanies.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Matthew J Hess at (844) 356-6399
(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)

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization) | <input type="checkbox"/> \$155.00 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$180.00 Filing Fees
and Certified Copy | <input type="checkbox"/> \$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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TALLAHASSEE, FLORIDA

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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:

Commercial Drying Research Institute LLC
(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 New Jersey
(Enter state, or if a non-U.S. entity, the name of the country)

on 1/30/2004
(date of organization, formation or incorporation)

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

Commercial Drying Research Institute, 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.

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TALLAHASSEE, FLORIDA

Signed this 30 day of December 2024.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: M. Hess

Printed Name: MATTHEW J HESS

Title: MBR

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

Signature: M. Hess

Printed Name: MATTHEW J HESS

Title: MBR

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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TALLAHASSEE, FLORIDA

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:

Matthew J Hess

360 Central Ave Suite 800

St Petersburg FL 33701

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

2 IN - 20-0663025

REQUIRED SIGNATURE:

M. Hess

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 J Hess

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)

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Commercial Drying Research Institute LLC
(Must contain the words "Limited Liability Company," "LLC," or "L.L.C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

360 Central Ave Suite 800
St Petersburg FL, 33701

Mailing Address:

360 Central Ave Suite 800
St Petersburg, FL 33701

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:

Matthew J Hess
Name

360 Central Ave Suite 800
Florida street address (P.O. Box **NOT** acceptable)

St Petersburg FL 33701
City Zip

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TALLAHASSEE, FLORIDA

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.,

M. Hess
Registered Agent's Signature (REQUIRED)

(CONTINUED)