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(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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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Pentagram Partners, L.P. Name of Resulting Florida Limited Partnership or Limited Liability Limited Partnership
The enclosed Certificate of Conversion, Certificate of Limited Partnership, and fees are submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S.
Please return all correspondence concerning this matter to:
Pentagram Partners L.P. Firm/Company 4775 Collins Awe # 3003 Address Miami Beach FL 33/40 City, State and Zip Code PSD atlas partners hips. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Patty Sharky Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$1,052.50 Filing Fees \$1,061.25 Filing Fees \$1,105.00 Filing Fees \$1,113.75 Filing Fees, (\$52.50 for Conversion and \$1,000 - Certificate) \$1 status \$1,000 Filing Fees \$1,113.75 Filing and Certified Copy and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Certificate of Conversion

For

"Other Business Organization"

Into

Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership			
submitted to convert the following "Other Business Entity" into a Florida Limit	<u>ed</u> =		
Partnership or Limited Liability Limited Partnership in accordance with s.620	. 2 1 04, <u>≤</u>		
Florida Statutes.	AUG.		
	ന : സ :		
1. The name of the "Other Business Entity" immediately prior to the filing of this	21		
Certificate of Conversion is:	PH		
Λ Λ Λ Λ			
Pentagram Partners, L.P.	2: 04		
Pentagram Partners, L.P. (Enter Name of Other Business Entity)	<u>-</u>		
2. The "Other Business Entity" is a /m.ted partnership (Enter entity type. Example: corporation, limited liability company, sol			
(Enter entity type. Example: corporation, limited liability company, sol	e		
proprietorship, general partnership, common law or business trust, etc.)		
first organized, formed or incorporated under the laws of New York			
(Enter state, or if a non-U.S. entity, the name of the country)			
intertal			
on			
(Enter date "Other Business Entity" was first organized, formed or incorpor	rated)		
3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership	ership		
as set forth in the attached Certificate of Limited Partnership:			
Pentagram Partners L.P. (Enter Name of Florida Limited Partnership or Limited Liability Limited			
(Enter Name of Florida Limited Partnership or Limited Liability Limited			
Partnership)			
4. The conversion was approved as required by Chapter 620, F.S., and was approved	ed in		
such a manner that complied with the converting organization's governing law.			
5. If not effective on the date of filing, enter the effective date:	 ·		
(The effective date: 1) cannot be prior to nor more than 90 days after the date			
document is filed by the Florida Department of State; AND 2) must be the sam			
the effective date listed in the attached Certificate of Limited Partnership, if a	n		
effective date is listed therein.)			
6. The conversion is permitted by the applicable law(s) governing the other business			
entity and the other business entity complies with such law(s) in effecting the conversion			

7. The "Other Business Entity" currently exists on the official records of the jurisdiction

under which it is currently organized, formed or incorporated.

Signed	thisday of	August	20	0 <u>14</u>	
Partne that the degree	ership/Limited Liability Lie facts stated in this docume felony as provided for in s.	mited Partnership: In nt are true. Any false in 317.155, F.S.	divid nform	ual(s) signin ation constit	g affirm(s) utes a third
Signatu Printed	nre: Patty Shanley	Title	:	GP	
Signati	ire:	<u> </u>			
Signatu Printed	re:Name:	Title	:		
Signatu	ıre:Name:				10 July 10 Jul
Signatu Printed	nre:	Title	 ::		P 2
	ire: Name:				•
that the	red Signature(s) on behalf of the facts stated in this docume felony as provided for in s. factors.	nt are true. Any false i 317.155, F.S. See belo	nforn w for	nation consti required sign	tutes a third nature(s).
If Flor Signatu If Direct	ida Corporation: ore of Chairman, Vice Chairmetors or Officers have not bee	nan, Director, or Officer nan selected, an Incorpora	itor m	ust sign.	
Signatu	re of one General Partner. ida Limited Liability Comp			-	
	ire of a Member or Authorize	d Representative.			
All oth Signatu	ers: ure of an authorized person.				
Fees:	Certificate of Conversion: Fees for Florida Certificate of (\$965 Filing Fee and Certified Copy: Certificate of Status:	•	\$ \$1. \$ \$	52.50 ,000.00 52.50 (Opti 8.75 (Opti	

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

Pentagram Partners L.P.	·
(Name of Limited Partnership or Limited Liability Limited Partnership, which must included Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership or LLLP.	
2. 4775 Collins Ave # 3003 Street address of initial designated office	DIVI
Street address of initial designated office Miami Beach, FL 33140	AUG 2
3. Patty Shanley Name of Registered Agent for Service of Process	
4. 4775 Collins Ave. #3003 Florida street address for Registered Agent	2: 04
Miami Beach, FL 33140	
5. I hereby accept the appointment as registered agent and agree to act in this capacity. I fu comply with the provisions of all statutes relative to the proper and complete performance of and I am familiar with an accept the obligations of my position as registered agent.	
Signature of Registered Agent	
6. 4775 Collins Aw # 3003 Mailing address of initial designated office	
Miami Beach, FL 33140	
7. If limited partnership elects to be a limited liability limited partnership, che	eck box ‰.

8. Name and business address Name:	Business Addre	
Patty Shanley	<u>4775 C</u>	alling Ane # 300
	Miami B	colling Ane # 3003 each, FL 33140
		
		14 OF V
		<u> </u>
9. Effective date, if other than the d	late of filing:	2: 0 5
(Effective date cannot be prio filed by the Florida Departme	r to nor more than 90 days afte ent of State.)	r the date the document is
Signed this 13th	day of August	2014
	ner: Individual(s) signing affirmalse information constitutes a the	
Potty Shonley.		