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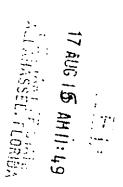
(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nami	e)
(Do	ocument Number)	
Centified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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### COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: The Jayne A. Follett Family Lin	mited Partnership LLLP or Limited Liability Limited Partnership
The enclosed Certificate of Conversion, Certificate of submitted to convert an "Other Organization" into a F Limited Liability Limited Partnership in accordance v	Florida Limited Partnership or
Please return all correspondence concerning this matter	er to:
David M Mcinerney	:
Contact Person	
UF Resources Corporation	
Firm/Company	<del></del>
8039 Cooper Creek Blvd, Suite 101	
Address	<del></del>
University Park FL 34201	
City, State and Zip Code	
dmcinerney@ufresources.com	
E-mail address: (to be used for future annual report notifica	ition)
For further information concerning this matter, please	e call:
David M McInerney at (94	1 556-0253
	Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
\$1.052.50 Filing Fees S1.061.25 Filing Fees Fees, (\$52.50 for Conversion and \$1.000 - Certificate)  \$1.061.25 Filing Fees and Certificate of Status	S1,105.00 Filing Fees S1,113.75 Filing and Certified Copy Certificate of Status
Registration Section For Division of Corporations Clifton Building For Formula	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

#### Certificate of Conversion

For

#### "Other Business Organization"

nto

#### Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

## The Jayne A. Follett Family Limited Partnership

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Family Limited Partnership

(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Indiana

(Enter state, or if a non-U.S. entity, the name of the country)

on 11/09/1995

(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:

## The Jayne A Follett Family Limited Partnership LLLP

(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 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 this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Limited Partnership, if an 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	I this 10 day of August		20	) 17			
Partne that th	ture of Each General Partner Listed in Attership/Limited Liability Limited Partnershe facts stated in this document are true. Any for felony as provided for in 2.817.155, F.S.	ւ <mark>ւթ։</mark> Inc	livid	ual(s) signir	ng affirm		
Signati	ure:						_
Printed	Name: FinPlan III, LLC by Rich Follett	_ Title:	Mana	ager			_
Signati	ure:						
Printed	I Name:	_ Title:					_
Signati	ure:						
Printed	I Name:	_ Title:					_
Signati	ure:						
Printed	I Name:	Title:					_
Printed	ure:d Name:	Title:		<del> </del>			_
							_
Signati	ure:	Title					_
rimec	i Name.	_ I IIIe.				<del></del>	
degree Signat	te facts stated in this document are true. Any e felony as provided for in \$817.155, F.S. [Se ure:	e below	for				HW 561 50 PM
<b>If Flo</b> Signat	rida Corporation: ure of Chairman, Vice Chairman, Director, or Cectors or Officers have not been selected, an Inc	Officer.			-ORIDA	5.1	11:10
	<mark>rida General Partnership or Limited Liabilit</mark> ure of one General Partner.	<u>y Parti</u>	<u>ierst</u>	nip:			
	rida Limited Liability Company: ure of a Member or Authorized Representative						
All ot Signat	hers: ure of an authorized person.						
Fees:							
	Certificate of Conversion:		\$	52.50			
	Fees for Florida Certificate of Limited Partne (\$965 Filing Fee and \$35 Filing Fee)	rship:	\$1.	.00.000			
	Certified Copy:		\$	52.50 (Opt	ional)		
	Certificate of Status:		S	8.75 (Opt	ional)		

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

1. The Jayne A Pollett Family Limited Partnership.	
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P. or LLLP.	
2. 8039 Cooper Creek Blvd, Suite 101	
Street address of initial designated office	•
University Park, FL 34201	
3. InCorp Services, Inc.	
Name of Registered Agent for Service of Process	
17888 67th Court North	• -
Florida street address for Registered Agent	177
Loxahatchee, FL 33470	AUG 1
5. 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 relative to the proper and complete performance of my duties; and I am familiar with an accept the obligations of my position as registered agent.  Nadine Long on behalf of InCorp.	A IT
Signature of Registered Agent	
6	
Mailing address of initial designated office	
8039 Cooper Creek Blvd., Suite 101, University Park, FL 34201	

Page 1 of 2

Name:	Business A	Address:		
FinPlan III, LLC	8039 Coope	8039 Cooper Creek Blvd Ste 101		
	University I	Park, FL 34201	·	
	<del> </del>			
	<del></del>			
		·	3	
		<del></del>		
			13.53.	
igned this 10th day	of	2017	.775	
ignature of each general partner:	Individual(s) signing	affirm(s) that the facts	stated in	
nis document are true. Any false i roviged for 15,817.155, F.S.	nformation constitute	s a third degree felony	as	
<del>( )</del>	<del></del>		· · · · · · · · · · · · · · · · · · ·	
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