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RPORATION NAME(S) & DO	OCUMENT NUMBER(S), (if known):
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Walk in Pick up tim	e Certified Copy
Mail out Will wait	Photocopy Certificate of Status
W FILINGS	<u>AMENDMENTS</u>
Profit	☐ Amendment
Not for Profit	Resignation of R.A. Officer/Differior
Limited Liability	Change of Registered Agent Dissolution/Withdrawal Merger
Domestication	Dissolution/Withdrawal
Other	— Meiger
HER FILINGS	
EDAT MILITOD	REGISTRATION/QUALIFICATION
Annual Report	Foreign Spr 38
Fictitious Name	Limited Partnership
	☐ Reinstatement
	☐ Trademark ,

CR2E031(7/97)

CERTIFICATE OF CONVERSION

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the <u>attached articles of organization</u> and this certificate of conversion to convert to a Florida limited liability company:

FIRST: The	name of the unin	corporated business	immediately prior	to filing this c	locument was
No.	The Capricon	n Group, Ltd.	A93000001	o <u></u> 2	
SECOND: T created or off A. B. C.	Date: Jurisdiction: If different fron	and the jurisdiction being are: january 13, 19 State of Flori the above noted ju	993 da risdiction, the juris		
THIRD: The organization is	name of the limits:	ted liability compan	y as set forth in the	: <u>attached</u> arti	cles of
	The Ca	pricorn Group, L	.L.C.		
(in accordance with s	ember or an Authoriection 608.408(3), Florition under the penalties	da Statutes, the execut	ion of this docum	nent
		ık Pesce, Member	or porjuly that the fact	is stated heleni a	ie true.)
	FLGI	Typed or Printed N	ame of Signee		
	\$ \$ \$	FILING F 100.00 Filing Fee for A 25.00 Filing Fee for C 25.00 Filing Fee for C 30.00 Certified Copy 5.00 Certificate of St	rticles of Organization degistered Agent Designation dertificate of Conversion (optional)	nation 📆	FILED 00 MAR -9 AM 9:38 SECRETARY OF SIAIR.

(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Capricorn Group, L.L.C.

ARTICLE II - Address:

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

902 Clint Moore Road, Suite 142, Boca Raton, Florida 33487

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Frank Pesce				
Name				
902 Clint Moore Road, Suite 142				
Florida street address (P.O. Box NOT acceptable)				
Boca Raton, FL 33487				
City, State, and 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 608, F.S..

Registered Agent's Signature

☐ The Limited	nagement (Check box if applicable.) Liability Company is to be managed by one manager or more managers and is, ager - managed company.
	(An additional article must be added if an effective date is requested)

5.00 Certificate of Status (OPTIONAL)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of peripary that the facts stated herein are true.)

Frank Pesce, Member

Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)