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(Business Entity Name)				
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Certified Copies	_ Certificate	s of Status		
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236 East 6th Avenue, Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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ХХ	FILING	CONVERSION	
1.	RE JACKSONVILLE, LLC (CORPORATE NAME AND DOCUMENT	Γ#)	
2.			
3.	(CORPORATE NAME AND DOCUMENT		
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COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: REJACKSONVILLE, LLC Name of Florida Limited Liability Company The enclosed Articles of Conversion and fee(s) are submitted to convert a Florida Limited Liability Company" into an "Other Business Entity" in accordance with s.605.1045, F.S. Please return all correspondence concerning this matter to: Jonathan Stern Contact Person c/o Fundamental Partners III LP Firm/Company 745 5th Avenue, 25th Floor Address New York, NY 10151 City, State and Zip Code jstern@fundamental.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: __ at (212 ____) 205-5006
Area Code and Daytime Telephone Number Jonathan Stem Name of Contact Person Enclosed is a check for the following amount: **\$60.00** Filing Fee, □\$55.00 Filing Fee ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee Certified Copy, and and Certificate of and Certified Copy Certificate of Status Status **MAILING ADDRESS:** STREET ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P. O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

CR2E106 (07/14)



Articles of Conversion For Florida Limited Liability Company Into

"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Elorida Statutes

Florida Statutes.			
1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:			
RE JACKSONVILLE, LLC			
Enter Name of Florida Limited Liability Company			
2. The name of the "Converted or Other Business Entity" is:			
RE JACKSONVILLE, LLC			
Enter Name of "Converted or Other Business Entity"			
3. The "Converted or Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)			
organized, formed or incorporated under the laws of Delaware (Enter state, or if a non-U.S. entity, the name of the country)			
(Date of organization, formation or incorporation)			
and the formation document is attached (if applicable).			
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S. 5. This conversion shall be effective in Florida on: The florida data this document is filed by the			
(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 of the conversion under the laws governing the "Other Business Entity.")			
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.			

- 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
 - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address:	155 Office Plaza Drive	
	Tallahassee, FL 32301	
Mailing Address:	155 Office Plaza Drive	
	Tallahassee, FL 32301	
7. The "Converted o appraisal rights th and 605.1061-605	e amount to which such member	reed to pay any members having rs are entitled under ss. 605.1006
Signed this	7 day of July	, ₂₀ 18
Signature:	Must be signed by a Member or	Authorized Representative
Printed Name: Brian	Flavell Title:	Authorized Person
Fees: Filing Fee: Certified Cop Certificate of	•	~ Cr /

Page 2 of 2

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SECRETARY OF STATE
TALLAHASSEE PERSTATE