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S. WARREN
JUN 0 1 2017

ANNA H. WINGER JD, CFP 200 1st Avenue NW, Suite 304 Hickory, NC 28601

Tel (828) 855-1889 Fax (888) 506-9063 anna@wingerlaw.com www.wingerlaw.com

May 24, 2017

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Statement of Correction - Silent Storm Holdings LLC

To Whom It May Concern:

Please find the enclosed forms for Silent Storm Holdings, LLC.

- 1. Cover Letter
- 2. Statement of Correction
- 3. Detail by Entity Name showing correction requested
- 4. Articles of Organization approved by NC Secretary of State

I appreciate your time and attention to this matter. Please contact me if you have any questions or concerns.

(iz 21 Wings

Sincerely,

Anna H. Winger

AHW/tja Enclosure

COVER LETTER

TO: Registration Section Division of Corporations Silent Storm Holdings LLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Statement of Correction and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Anna H. Winger Winger Law PLLC 200 1st Avenue NW Suite 304 Hickory, NC 28601 City/State and Zip Code shaylamujic@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 381-0186 Anna H. Winger Name of Person Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$25 Filing Fee \$55 Filing Fee & \$60 Filing Fee, \$30 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: Silent Storm Holdings LLC L11000030233 The Florida Document number of the limited liability company is: SECOND: Articles of Conversion for Florida Limited Liability Company into "Converted or Other Business Entity" THIRD: Document to be corrected is: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The incorrect statements are that the "Converted or Other Business Entity" was formed on May 1, 2017 and that the conversion effective date is May 1, 2017. The correct statements are that the date of organization for Silent Storm Holdings LLC in North Carolina is May 23, 2017 and the conversion shall be effective on May 23, 2017. OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> П The electronic transmission of the record was defective. Signature of Authorized Representative Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). New Registered Agent's Signature, if changing Registered Agent: 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 and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25 00

\$30.00 (optional)

CR2E062 (9/15)



NORTH CAROLINA Department of the Secretary of State

To all whom these presents shall come, Greetings:

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

ARTICLES OF ORGANIZATION

OF

SILENT STORM HOLDINGS LLC

the original of which was filed in this office on the 23rd day of May, 2017.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 23rd day of May, 2017.

Elaine I. Marshall

Secretary of State

SOSID: 1597406 Date Filed: 5/23/2017 5:38:00 PM Elaine F. Marshall North Carolina Secretary of State

C2017 114 01604

(Form L-01A)

State of North Carolina Department of the Secretary of State

ARTICLES OF ORGANIZATION **INCLUDING ARTICLES OF CONVERSION**

Pursuant to §§ 57D-2-21, 57D-9-20 and 57D-9-22 of the General Statutes of North Carolina, the undersigned converting business entity does hereby submit these Articles of Organization Including Articles of Conversion for the purpose of forming a limited liability company pursuant to the conversion of another eligible entity.

	F F	·		.) P=:===::	order or michies subjects sinity.		
l.	The name	of the limited liab	ility company is	SILENT STORM HOL	DINGS LLC		
	The limit	d liability compan	y is being forme	d pursuant to a conversion te entity designation)	on of another business entity.		
2.	The name	he name of the converting business entity is: SILENT STORM HOLDINGS LLC					
	and the or	ganization and into untry of Florida	emal affairs of th	e converting business er	ntity are governed by the laws of the		
	A plan of	conversion has bee	n approved by t	he converting business e	ntity as required by law.		
3.	foreig foreig foreig	limited liability c limited partnershi limited liability p	ompany;	nestic limited partnershi registered limited liabili			
4.	The maili	ig address of the co	onverting entity	prior to the conversion is	3:		
	Number and Street: 2801 Florida Avenue No. 218						
	City: Mlat	ni	_State: FL	_ Zip Code: 33133	County: Miami-Dade		
	If differen	t, the mailing addre	ess of the resulting	ng business entity is:			
	Number a	ed Street: 2132 Ro	ston Drive	-			
	City: Cha	lotte	_State: NC	_ Zip Code: 28207	County: Mecklenberg		
5.	The name and address of each person executing these articles of organization is as follows: (State whether each person is executing these articles of organization in the capacity of a member, organizer or both. Note: This document must be signed by all persons listed.) Anna H. Winder, Organizer						
		venue NW Sulte :	304				
	Hickory,	IC 28601	•				
	RATIONS D		-	OX 29622	RALEIGH, NC 27626-0622 (Form L-01A)		

Page 1

6.	The name of the initial registered agent is: Anna H. Winger				
7.	The street address and county of the initial registered office of the limited liability company is:				
	Number and Street: 200 1st Avenue NW Suite 304				
	City: Hickory State: NC Zip Code: 28601 County: Catawba				
8.	The North Carolina mailing address, if different from the street address, of the initial registered office				
	Number and Street: 2132 Rolston Drive				
p harring og gy	Charlotte State: NC Zip Code: 28207 County: Mecklenberg				
9.	Principal Office Information: Select either a or b.				
	a. The limited liability company has a principal office.				
	The principal office telephone number: 704-904-6357				
	The street address and county of the principal office of the limited liability company is:				
	Number and Street: 2132 Rolston Drive City: Charlotte State: NC Zip Code: 28207 County: Mecklenberg				
	The mailing address, if different from the street address, of the principal office of the limited liability company is:				
	Number and Street: same				
	City: State: Zip Code: County:				
	b. The limited liability company does not have a principal office.				
10.	Any other provisions which the limited liability company elects to include (e.g., the purpose of the entare attached.				
11.	(Optional) Please provide a business e-mail addres The Secretary of State's Office will e-mail the business automatically at the address provided at no				
	charge when a document is filed. The e-mail provided will not be viewable on the website. For more information on why this service is being offered, please see the instructions for this document.				

These articles will be effective upon t	filing, unless a future date is specified:
s is the 4th day of May 20	<u>,17</u> .
	(Optional: Business Entity Name) Signature
	Anna H. Winger, Organizer
	Type or Print Name and Title
(Optional: Business Entity Name)	(Optional: Business Entity Name)
Signature	Signature
Type or Print Name and Title	Type or Print Name and Title
(Optional: Business Entity Name)	(Optional: Business Entity Name)
Signature	Signature
Type or Print Name and Title	Type or Print Name and Title

NOTES:

Filling fee is \$125. This document must be filed with the Secretary of State.