LIIDOCOUS34

(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: L. SELLERS
MAY 2 5 2011
EXAMINER
Jul nann

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SECRETARY OF STATE

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COVER LETTER

Registration Section Division of Corporations

TO:

	(Name of Resulting Florida Limited Company)
	The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
	Please return all correspondence concerning this matter to:
	Andrew Sanford (Contact Person)
	(Contact Person)
	179 Management LLC (Firm/Company)
	(Firm/Company)
	13490 old Livingston Rd.
	(Address)
	No slev A 24109
	Naples, FL 34109 (City, State and Zip Code)
	admin @ itgholdings.com
	E-mail address: (to be used for future annual report notifications)
	For further information concerning this matter, please call:
	Andrew Sanford at (239) 514-4484 (Name of Contact Person) (Area Code and Daytime Telephone Number)
	Enclosed is a check for the following amount:
K 7	\$150.00 Filing Fees \$155.00 Filing Fees \$180.00 Filing Fees \$185.00 Filing Fees,
•	(\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and
	& \$125 for Articles Status Certificate of Status of Organization)
	STREET ADDRESS: Registration Section Registration Section
	Registration Section Registration Section Division of Corporations Division of Corporations
	Clifton Building P. O. Box 6327
	2661 Executive Center Circle Tallahassee, FL 32314
	Tallahassee, FL 32301



May 5, 2011

ANDREW SANFORD 13490 OLD LIVINGSTON ROAD NAPLES, FL 34109

SUBJECT: ITG FUND MANAGEMENT, LLC

Ref. Number: W11000025212

We have received your document for ITG FUND MANAGEMENT, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 411A00011095

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certif	ficate o	f	
Conversion is: ITG Find Management Inc.			
(Enter Name of Other Business Entity)	•		
2. The "Other Business Entity" is a <u>Corporation</u>	,		
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)			
first organized, formed or incorporated under the laws of Florida	_		
(Enter state, or if a non-U.S. entity, the name of the country)			
on 3/23/1948 (Enter date "Other Business Entity" was first organized, formed or incorp	norata	4)	
(Enter date Other Business Entity was inst organized, formed or incorp	or att	u <i>)</i>	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country ur which it is now organized, formed or incorporated:	ider the	e laws	of
n/a	SECF	11 HAY	online.
4. The name of the Florida Limited Liability Company as set forth in the attached Arti Organization:	ACTOR Clean	NY 24 PM 1: 1	
TG Fund Management LLC (Enter Name of Florida Limited Liability Company)	E.F.S	×	0
(Enter Name of Florida Limited Liability Company)	STATE FLORID	: 15	
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 filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective attached Articles of Organization, if an effective date is listed therein.)			
6. The conversion is permitted by the applicable law(s) governing the other business enti- conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting	•		rsion.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction currently organized, formed or incorporated.	under	which	ı it is

Signed this 8 day of April	20_11					
Signature of Member or Authorized Representative of Limited Liability Company: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155. F.S.						
Signature of Member or Authorized Represe Printed Name: Hndrew E Sanford	entative: Inlu Suffer Title: Director					
Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]						
Signature: Printed Name: Daniel Carter	Title: Director					
Signature: Andrew E. Sanfor	2Title: Dicector					
Signature:Printed Name:	Title:					
Signature: Printed Name:	Title:					
	Title:					
Signature: Printed Name:	Title:					
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.						
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.						
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.						
All others: Signature of an authorized person.						
Fees:						
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2					

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ITG Fund Managemen	of LLC
(Must end with the words "Limited Liability Company, the abbre	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
13490 Old Lungston Rd. Naples, FL 34109	13490 Old Lungston Rd. Naples, Fr. 34109
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ed Agent. You must designate an individual or another
The name and the Florida street address of the re-	gistered agent are: EIN: 271520278
ITG Manager	Name
	P.O. Box NOT acceptable)
Nantes	FI. 74109

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED

11 MAY 24 PM 1: 15

SECRETARY OF STATE
TABLAHASSEE, FLORID

ARTICLE IV- Manager(s) or I The name and address of each M	Managing Member(s): [anager or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Daniel E Carter 13490 Old Lungston Ko. Naples, Fr. 34109
MGRM	Andrew E Sanford 13440 Old Lyngston RD Paples, FL 34109
(No attackment if masses in)	
(Use attachment if necessary) ARTICLE V: Effective date, if other t	han the date of filing:
(The effective date: 1) cannot be prior	han the date of filing: (OPTIONAL) r to nor more than 90 days after the date this document is filed by (D 2) must be the same as the effective date listed in the attached ive date listed therein.)
REQUIRED SIGNATURE Signature of a member or a	Safus an authorized representative of a member.
the penalties of perjury that the facts st	Florida Statutes, the execution of this document constitutes an affirmation under ated herein are true. I am aware that any false information submitted in a onstitutes a third degree felony as provided for in s.817.155, F.S.)

Andrew E Sanford
Typed or printed name of signce