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## SUNSHINE CORPORATE FILING OF FLORIDA

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## **COVER LETTER**

| TO:   | Registration S<br>Division of C |   |                                  |            |   |
|---|---------------------------------|---|----------------------------------|------------|---|
| SHE   | IECT: MUSE IN                   | VESTORS, LLC  |                                  |            |   |
| 3011  | ECI,                            | Name of Florida   | Limited Liability C              | Company    |   |
| Limit   |                                 | s of Conversion and fompany" into an "Othe  |                                  |            |   |
| Please  | e return all corr               | espondence concernin  | g this matter to:                |            |   |
| Sharor  | n K. Gray                       |   |                                  |            |   |
|   |                                 | Contact Person  |                                  | -          |   |
| Triad I   | Professional Servi              | ces   |                                  |            |   |
|   |                                 | Firm/Company  |                                  | -          |   |
| 1720 V  | Windward Concou                 | rse, Ste. 390   |                                  | - <u>-</u> |   |
| Alpha   | retta, GA 30005                 | Address   |                                  | _          |   |
|   | (                               | City, State and Zip Code  |                                  |            |   |
| peckd   | @gtlaw.com                      |   |                                  |            |   |
| •   |                                 | be used for future annual   | report notification)             | -          |   |
| For fu  | urther informati                | on concerning this ma   | itter, please call:              |            |   |
| Sharo   | n K. Gray                       |   | at ( <sup>770</sup>              | 777-2      | 1091  |
| N   | Name of Contact P               | erson   |                                  | and Dayt   | ime Telephone Number  |
| Enclo   | sed is a check                  | for the following amou  | unt:                             |            |   |
| ☐ \$25  | 5.00 Filing Fee                 | ☐ \$30.00 Filing Fee<br>and Certificate of<br>Status  | ■\$55.00 Filing and Certified Co |            | ☐ \$60.00 Filing Fee,<br>Certified Copy, and<br>Certificate of Status |
| STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |                                 | MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 |                                  |            |   |
| CR2E  | 106 (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, Florida Statutes.

- 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:   | 3850 Bird Road, 8th Flr.   | ·  |
|-------------------|--|--|
|                   | Miami, FL 33146  |  |
| Mailing Address:  | 3850 Bird Road, 8th Flr.   |  |
|                   | Miumi, FL 33146  |  |
|                   | or Other Business Entity" has agreed to pay any members the amount to which such members are entitled under ss. 605.1072, F.S. |  |
| Signed this 23rd  | day of, 2  | 20_17  |
| Signature:        | Must be signed by a Member or Authorized Representative  | <del></del>  |
| Printed Name: Ton | nas E. Cabrerizo  Title:   | MAY 26   |
|                   | \$25.00<br>opy: \$30.00 (Optional)<br>of Status: \$5.00 (Optional)   | TO THE PART OF THE |

Page 2 of 2