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(Re	questor's Name)	
(Ad	dress)	,
(Ad	dress)	
(Ĉit	y/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL.
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

.

Office Use Only



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10TH FLOOR • TWO LEADERSHIP SQUARE 211 NORTH ROBINSON • OKLAHOMA CITY, OK 73102-7103 (405) 235-9621 • FAX (405) 235-0439 www.mcafeetaft.com WRITER DIRECT (405) 552-2362 FAX (405) 235-0439 jane.henson@mcafeetaft.com

May 10, 2017

FEDERAL EXPRESS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Conversion of Rooney T

Investments, LLC (a TX entity) to Rooney Trusts Investments, LLC

(a FL entity)

Ladies and Gentlemen:

Enclosed for filing are two copies if needed of:

- 1. Articles of Conversion converting Rooney T Investments, LLC (a Texas entity) into Rooney Trusts Investments, LLC (a Florida entity); and
- 2. Articles of Organization for Rooney Trusts Investments, LLC (a Florida entity).
- 3. Also enclosed is our check for \$185 to cover filing fees, certified copy fee and a certificate of status.

Please return filing evidence and copies in the enclosed prepaid, self-addressed Federal Express envelope.

Thank you for your assistance.

Sincerely,

Jane E. Henson-Martin

Legal Assistant

Enclosures

COVER LETTER

Division of C	orporations			
SUBJECT:	ROONEY	TRUSTS INVE	STMENTS,	LLC
Sebole II.	(Name of Res	ulting Florida l	Limited Con	npany)
		_		d fees are submitted to convert an "Othe coordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter	to:	
Jane Henson				
	(Contact Person)			
McAfee & Taft A Profes	sional Corporation			
	(Firm/Company)			
10th Fl, Two Leadership	Square, 211 N. Robinson			
	(Address)			
Oklahoma City, Oklahor	na 73102			
((City, State and Zip Code)			
MRooney@rooneyholdi	ngs.com			
E-mail Address: (to b	e used for future annual re	port notificatio	ns)	
For further information	on concerning this ma	tter, please c	all:	
Jane Henson		_at () 552-2	2362
(Name of Conta	ect Person)	(Area C	ode) (Day	time Telephone Number)
	For the following amount a bank located in the			sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	■\$180.00 F and Certified	•	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	M	AILING A	ADDRESS:
New Filing Section			w Filing S	
Division of Corporat Clifton Building	ions		vision of C O. Box 63	Corporations
Cinton bunding		1,	G. DUX US	<u> </u>

Tallahassee, FL 32314

32301

2661 Executive Center

Circle Tallahassee, FL

`TO: New Filing Section

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Article ROONEY T INVESTMENTS, LLC	es of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of	name of the country)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	cles of Organization:
ROONEY TRUSTS INVESTMENTS, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: date of filing (The effective date: 1) cannot be prior to date of receipt or filed date nor more than after the date this document is filed by the Florida Department of State; AND 2) must the effective date listed in the attached Articles of Organization, if an effective date Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	ust be the same as is listed therein.)
5. The plan of conversion has been approved in accordance with all applicable statutes.	
6. The "Converted or Other Business Entity" has agreed to pay any members having apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	al rights the amount to

Signed this <u>28</u> day of <u>April</u>	20_17
Signature of Authorized Representative of Lim	nited Liability Company:
Signature of Authorized Representative: Kathleen C. Rooney	Little: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Kathleen C. Rooney	Title: Manager
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
. All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

17 MAY 11 AM 9: 30

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ROONEY TRUSTS IN	VESTMENTS, LLC
(N		oility Company, "L.L.C.," or "LLC.")
ARTICLE II - A The mailing addr		e principal office of the Limited Liability Company
Principal Office	Address:	Mailing Address:
		3705-1 Westview Drive
3705-1 Westview D	rive	3,03 : 1,00111011 01110
Naples, Florida 341 ARTICLE III - i (The Limited Liability business entity with an	04 Registered Agent, Registe	Naples, Florida 34104 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
Naples, Florida 341 ARTICLE III - i (The Limited Liability business entity with an	Registered Agent, Registe Company cannot serve as its own R n active Florida registration.)	Naples, Florida 34104 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
Naples, Florida 341 ARTICLE III - i (The Limited Liability business entity with an	Registered Agent, Registe Company cannot serve as its own R n active Florida registration.) e Florida street address of the Michael C. Rooney	Naples, Florida 34104 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
Naples, Florida 341 ARTICLE III - i (The Limited Liability business entity with an	Registered Agent, Registe Company cannot serve as its own R n active Florida registration.) e Florida street address of the Michael C. Rooney	Naples, Florida 34104 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
Naples, Florida 341 ARTICLE III - i (The Limited Liability business entity with an	Registered Agent, Register Company cannot serve as its own Refered active Florida registration.) E Florida street address of the Michael C. Rooney No. 3705-1 Westview Drive	Naples, Florida 34104 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
Naples, Florida 341 ARTICLE III - i (The Limited Liability business entity with an	Registered Agent, Register Company cannot serve as its own Refered active Florida registration.) E Florida street address of the Michael C. Rooney No. 3705-1 Westview Drive	Naples, Florida 34104 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:

Registered Agent's Signature (REQUIRED)

TAMAY IL AM 9: 30

"AMBR" = Authorized Member	Name and Address:	
'MGR" = Manager		
MGR	Kathleen C. Rooney	
With the second	3705-1 Westview Drive	-
	Naples, Florida 34104	-
	Trupies, Floring 57.0	-
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E V: Effective date, if other than the ective date is listed, the date must or 90 calendar days after the date of		ness
LE V: Effective date, if other than the fective date is listed, the date must or 90 calendar days after the date of the date in this block does not meet the effective date on the Department of State's	be specific and cannot be more than five busing filing.) the applicable statutory filing requirements, this date will no	ness
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EV: Effective date, if other than the dective date is listed, the date must or 90 calendar days after the date of date inserted in this block does not meet the date on the Department of State's dective date on the Department of State's deceive date. EQUIRED SIGNATURE: Signature of a member This document is executed in active date.	the specific and cannot be more than five busing of filing.) the applicable statutory filing requirements, this date will not specords. Toran authorized representative of a member. specordance with section 605.0203 (1) (b), Florida Statutes.	be A
EV: Effective date, if other than the dective date is listed, the date must or 90 calendar days after the date of date inserted in this block does not meet the defective date on the Department of State's defective date on the Department of State's defective date. EQUIRED SIGNATURE: Signature of a member This document is executed in act am aware that any false informs.	the specific and cannot be more than five busing of filing.) the applicable statutory filing requirements, this date will not specific and authorized representative of a member. The cordance with section 605.0203 (1) (b), Florida Statutes, attion submitted in a document to the Department of State:	ness the 17 HAY II AM 9:
EV: Effective date, if other than the dective date is listed, the date must or 90 calendar days after the date of date inserted in this block does not meet the effective date on the Department of State's device. EVI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a member This document is executed in act am aware that any false informs.	the specific and cannot be more than five busing of filing.) the applicable statutory filing requirements, this date will not specords. Toran authorized representative of a member. specordance with section 605.0203 (1) (b), Florida Statutes.	ness the 17 HAY II AM 9:
LE V: Effective date, if other than the fective date is listed, the date must for 90 calendar days after the date of e date inserted in this block does not meet the effective date on the Department of State's LE VI: Other provisions, if any. Signature of a member This document is executed in acl ain aware that any false informations titutes a third degree felony Kathleen C. Rooney	cordance with section 605.0203 (1) (b), Florida Statutes, ation submitted in a document to the Department of Statutes as provided for in s.817.155, F.S.	be A
LE V: Effective date, if other than the fective date is listed, the date must for 90 calendar days after the date of e date inserted in this block does not meet the effective date on the Department of State's LE VI: Other provisions, if any. Signature of a member This document is executed in acl ain aware that any false informations titutes a third degree felony Kathleen C. Rooney	Crordance with section 605.0203 (1) (b), Florida Statutes, attion submitted in a document to the Department of Statutes as provided for in s.817.155, F.S.	ness the 17 HAY II AM 9:

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-