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### COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Sugarloaf Financial Group, LLC (Name of Resulting Florida Limited Company)
(Name of Resulting Florida Limited Company)
The enclosed Articles 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. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Jeff Richardson (Contact Person)
Jeff Richardson (Contact Person)  Sugarloaf Financial Group, LLC (Firm/Company)
13909 Niranese Street
13909 Niranese Street (Address)  Venice, FL 34293 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Teff Richardson at (678) 457-4215  (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
☐ S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ S155.00 Filing Fees and Certified Copy (\$25 for Articles of Organization) ☐ S185.00 Filing Fees (\$2185.00 Filing Fees and Certified Copy (\$2185.00 Filing Fees and Certified Copy (\$2185.00 Filing Fees (\$21
STREET ADDRESS: New Filing Section Division of Corporations  MAILING ADDRESS: New Filing Section Division of Corporations
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
SHSIL (7/17) Scheck already submitted in February 18.

INHS11 (7/17)

## Articles of Conversion For "Other Business Entity" Into

### Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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 Articles of Conversion is:	
Sugarleaf Francial Group, LLC (Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, e	lc.
First organized, formed or incorporated under the laws of	
on $\frac{1-4-2017}{\text{(date of organization, formation or incorporation)}}$	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization  Sugar Oaf Francial Group, LLC  (Enter Name of Florida Limited Liability Company)	1:
4. If not effective on the date of filing, enter the effective date:  (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)  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.	er
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 appraisal rights the amount twhich such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	o

Signed this and day of July	_ 20 <u>_ 18</u>
Signature of Authorized Representative of Limi	
	167
Signature of Authorized Representative:(/	Mele
Signature of Authorized Representative:  Printed Name: FFF Richardson	_Title: <u>Owner</u> stiember
Signature(s) on behalf of Other Business Entity:	
Signature: MA	
Signature: MARCHARD Signature: Sept Richardson	Title: Ower Ment
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature	
Signature:Printed Name:	Title
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Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	065
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
g	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Sugarloaf Fina	arcial Group, LLC
(Must contain the words "Limited Liability	(Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
13909 Miranese Street Venice, FL 34293	13909 Miranese Street Venice, FC 34293
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the r	egistered agent are:
Jeff Riche Name	ardson
13909 mwan	
Venice.	FL 34293

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. Thereby 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 605, F.S..

Zip

Registerod Agent's Signature (REQUIRED)

City

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager  MGR (2)	Jeff Richardson 13903 Miranese St. Venice, FL 34293
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
OLE V. Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware to the Department of State constitutes a third degree fel
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	with section 605.0203 (1) (b). Florida Statutes, I am aware to the Department of State constitutes a third degree fel
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware to the Department of State constitutes a third degree felloped or printed name of signee  Filing Fees

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

ARTICLE IV-

Company: