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(Ře	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
·		
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: New Frontier Investments	LLC
(Na	ne of Resulting Florida Limited Company)
	n. Articles of Organization, and fees are submitted to convert an "Other nited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence co	ncerning this matter to:
Robin L. Burton	
(Contact Pers	
Baldwin Accounting CPA, PA	
(Firm/Compa	
5728 Major Blvd., Suite 501	ALLAHASE
(Address)	
Orlando, FL 32819	(Code)
(City, State and Zi	Code)
Robin@baldwinaccountingepa.com	0
E-mail Address; (to be used for future	innual report notifications)
For further information concerning	this matter, please call:
Todd Baldwin	at (407) 363-0890
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located	g amount: (All checks processed by this office must be payable in US in the United States)
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing and Certificate Status	
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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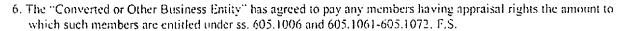
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For "Other Business Entity"

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 \$.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: New Frontier Investments LLC
(Enter Name of Other Business Entity)
The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
11/28/2012 on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: New Frontier Investments LLC
(Enter Name of Florida Limited Liability Company)
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 with stocoment is filed by the Florida Department of State.) Note: In the date inserted in this block does not meet the applicable statutory filing requirements, this date will rea be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.





Signed this 24th day of April	20_18
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Charles Nixon Morgan	11.9
Printed Name: Charles Nixon Morgan	Title: AMBR
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: ()	
Signature:Charles Niver Morrela	Tide. AMDD
Printed Name: Charles Nixon Morgan	TRE: AMBR
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
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Signature: Printed Name:	Tide
rance same.	
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
45.00	
If Florida Corporation:	Agr.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
Ti Directors of Officers have not been selected, an im-	corporator musi sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	
_	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALI. General Partners.	
All others:	
Signature of an authorized person.	
to gradie of an addition zed person.	
Fees:	
4 25 Lui - 60 u	23.7.00
rees for righted retrietes of Organization. Certified Copy:	\$72.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
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TALLAHASSA:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan	10:				
The name of the Lit	mited Liability Company is	:			
New Frontier Investme	ents LLC				
(Mus	st contain the words "Limited Liabili	ity Company, "L.L.C.," or "LLC."	")		
ARTICLE II - Add	dress:				
	s and street address of the p	rincipal office of the Lim	nited Liability Compa	any is:	
Principal Office A	ddress:	Mailing Address:			
5728 Major Blvd., #51	0	5728 Major Blvd., #510			
Orlando, FL 32819		Orlando, FL 32819			
(The Limited Limbility Corbusiness entity with an ac	egistered Agent, Registere mpany cannot serve as its own Registive Florida registration.) Torida street address of the Todd Baldwin	stered Agent. You must designate	an individual or anogogy,	18 AUG -7 PH 2:	1000 mm
	Nam	e	ু	\circ	
	5728 Major Blvd., Suite 501				
	Florida street address (P.C	D. Box <u>NOT</u> acceptable)			
	Orlando	FL 32819	_		
	City	Zip			

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

	Name and Address:
AMBR" = Authorized Member MGR" = Manager	
AMBR	Opportunity Global Development Structuring (PTY)
	HERBY CEDRESCITED BY.
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Use attachment if necessary)	
Ose attachment it necessary)	
- m x 2 - Co.)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	;
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	or an authorized representative of a member
Signature of a member of	or an authorized representative of a member nee with section 605,0203 (1) (b). Florida Statutes, I am aware that cument to the Department of State constitutes a third degree felon