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((Requestor's Name)
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COVER LETTER

	iling Section on of Corporati	ons			
SUBJECT: 1	OOMIS INVEST	MENT 13, LLC			
500,0001		(Name of Res	ulting Florida Lin	nited Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return	all corresponde	nce concerning	g this matter to	:	
LOUIS J. BOYI)				
	(Conta	ect Person)			
GRANITE ASS	OCIATES, INC.				
	(Firm/	Company)		_	
225 BANYAN I	BOULEVARD, S	UITE 130			
	(A)	ddress)		_	
NAPLES, FL 34	102				
	(City, State	and Zip Code)			
dcolavito@gran	itelp.com				
E-mail Addre	ess: (to be used fo	r future annual rep	ort notifications)	_	
For further inf	ormation conc	erning this mat	ter, please call	:	
LOUIS J. BOYI)		_at (, 228-6	5505
(Name	of Contact Person)	(Area Cod	e) (Day	time Telephone Number)
		ollowing amou located in the U	•	process	sed by this office must be payable in US
\$150.00 Filin (\$25 for Convers & \$125 for Artic of Organization)	ion and Cer	.00 Filing Fees tificate of	□\$180.00 Filir and Certified Co		■\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET AD New Filing Sc Division of Co Clifton Buildi 2661 Executiv Tallahassee, F	ection Orporations ng re Center Circle	:	New Divis P. O.	Filing So ion of C Box 632	Corporations

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.

(Enter Name of Other Business Entity)	-
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY	
(Enter entity type. Example: corporation, limited partnership, general partnership, c	ommon law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. enti	ty, the name of the country)
FEBRUARY 18, 2016 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached	Articles of Organization:
LOOMIS INVESTMENT 13, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: [JANUARY 1, 2019] (The effective date: [The effective date:	
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, the document's effective date on the Department of State's records.	nis date will not be listed as the
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, 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 statutory.	nis date will not be listed as the
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, the document's effective date on the Department of State's records.	nis date will not be listed as the

Signed this 15th day of November	20/8		
Signature of Authorized Representative of Limi	ted Liability Company:		
Signature of Authorized Representative:			
Signature of Authorized Representative: Printed Name: ADAM GERRY	Title: MANAGER	_	
Signature(s) on behalf of Other Business Entity:	 See below for required signature(s)		
Signature:			
Printed Name: ADAM GERRY	Title: MANAGER	-	
Signature:			
Signature: Printed Name:	Title:	- -	
Signature:		_	
Signature: Printed Name:	Title:	-	
Signature:Printed Name:		_	
Printed Name:	Title:	-	
Signature: Printed Name:		_	
Printed Name:	_ Title:	-	
Signature:			
Signature: Printed Name:	_ Title:	-	
If Florida Corporation:			
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.		··· ,	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:	¥	8
Signatures of <u>ALL</u> General Partners.	 	,	0EC
All others:		25 to 50 to	1
Signature of an authorized person.			7 · · · · · · · · · · · · · · · · · · ·
' <u>ees:</u>		LORIDA	7 AM 9: 55
	60.5 0.0	IDA AGE	55
Articles of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$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	vis:	
LOOMIS INVESTMENT 13, LLC		
· · · · · · · · · · · · · · · · · · ·	ability Company, "L.L.C" or "LI.C.")	
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
225 BANYAN BOULEVARD	225 BANYAN BOULEVARD	
SUITE 130	SUITE 130	
NAPLES, FL 3 4102	NAPLES, FL 34102	
The name and the Florida street address of t GRANITE ASSOCIATES. I	NC.	100 -7 A
	ame	
225 BANYAN BOULEVAR	OD SHITE 120	
	P.O. Box NOT acceptable)	988 x 55
NAPLES	F[_34102	<i>₽</i> *
City	Zip	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as Registered Agent's f	ed in this certificate. I hereby accerpacity. I further agree to comply ete performance of my duties, and s registered agent as provided for	pt the appointment as with the provisions of all U am familiar with and

(CONTINUED)

	1)	T'I	Cl	E	T	N/
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The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager				
MGR — Manager	ADAM GERRY			
	GRANITE ASSOCIATES, INC., 225 BANYAN			
	BLVD., SUITE 130, NAPLES, FL 34102			
	· · · · · · · · · · · · · · · · · · ·			
	<u> </u>			
(Use attachment if necessary)	TO COL			
LE V: Other provisions, if any.	RIOS			
REQUIRED SIGNATURE:				
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware ment to the Department of State constitutes a third degree fe			
ADAM GERRY, MANAGER				
Ту	ped or printed name of signee			
	Filing Fees			

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)