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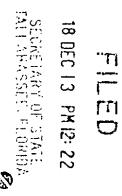
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	_
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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T SCHROEDER

COVER LETTER

TO: New Filing Se Division of Co				
SUBJECT: GRANIT	E PREFERRED INVEST	MENT, LLC		
30000C1.	(Name of Res	ulting Florida Limite	d Con	npany)
		•		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
LOUIS J. BOYD				
	(Contact Person)	,		
GRANITE ASSOCIATE	S, INC.			
	(Firm/Company)			
225 BANYAN BOULEV	ARD, SUITE 130			
	(Address)	-		
NAPLES, FL 34102				
((City, State and Zip Code)			
dcolavito@granitelp.com	1			
E-mail Address: (to be	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
LOUIS J. BOYD		at (²³⁹	228-6	5505
(Name of Conta	ct Person)	_ \	/ (Day	rtime Telephone Number)
	or the following amou a bank located in the	•	ocess	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	□S180.00 Filing I and Certified Copy		S185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILI	NG A	ADDRESS:
New Filing Section		New Fil	ing S	ection
Division of Corporati	ons			Corporations
Clifton Building		P. O. Bo	ox 631	27

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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.

of Conversion is:
iw or business trust, etc.)
ne of the country)
s of Organization:
alendar days after
THE amount to FILED SECNETARY OF STATE 18 OF 13 PH 12: 22

Signed this 15th day of November	20 <u>/</u> 8	
Signature of Authorized Representative of Lim	ited Liability Company:	
-Signature of Authorized Representative: Printed Name: ADAM GERRY	\$	
Printed Name: ADAM GERRY	Title: MANAGER	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)	I
	GRANITE PREFERRED INVESTMENT	GP CORP, GENERAL PARTNER
Printed Name: LOUIS J/BOYD	Title: ASSISTANT TREASURER	
Signature:Printed Name:		
Printed Name:	Title:	_
Signature: Printed Name:		
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	Officer. corporator must sign.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others:		
Signature of an authorized person.		E s: =
² ees:		
Articles of Conversion:	\$25.00	FIL DEC 13
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	ED PM 12: 22
	Ø.	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of th	e Limited Liability Compar	ny is:	
GRANITE PREF	ERRED INVESTMENT, LLC		
		liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing ad-		he principal office of the Limit	ted Liability Company is:
<u>Principal Offic</u>	ce Address:	Mailing Address:	
225 BANYAN BO	OULEVARD	225 BANYAN BOULEVA	RD
SUITE 130 NAPLES, FL 341	102	SUITE 130 NAPLES, FL 34102	
The name and t	the Florida street address of GRANITE ASSOCIATES. 1 225 BANYAN BOULEVA	INC.	FILED DEC 13 PM 12: 22 ORETARY OF STATE ANASSEE FLORID
	Florida street address	(P.O. Box NOT acceptable)	: 22 FATE DRIDD
	NAPLES	FL 34102	60
	City	Zip	
liability ca registered ag statutes rela	ompany at the place designal ent and agree to act in this c ating to the proper and comp e obligations of my position of	and to accept service of process ted in this certificate. I hereby a apacity. I further agree to complete performance of my duties, as registered agent as provided of the confidence of the confidence (REQUIRED)	ccept the appointment as ply with the provisions of all and I am familiar with and

(CONTINUED)

ARTICLE IV-

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	ADAM GERRY GRANITE ASSOCIATES, INC. 225 BANYAN BLVD, SUITE 130, NAPLES, FL 34102
(Use attachment if necessary)	SECRE I/ ALL AHA
LE V: Other provisions, if any.	SSEE. FI
REQUIRED SIGNATURE:	
This document is executed in accordance any false information submitted in a docur	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware nent to the Department of State constitutes a third degree for
as provided for in s.817.155, F.S.	
as provided for in s.817.155, F.S. ADAM GERRY, MANAGER	