# L19000018073

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

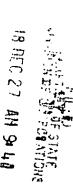




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# COVER LETTER

<b>TO:</b> New Filing S Division of C						
SUBJECT: Emerald	Funding Partners, LLC					
505612011	(Name of Re	sulting Florida Limit	ed Cor	mpany)		
				nd fees are submitted to conveccordance with s. 605.1045,		ıcı
Please return all corr	espondence concernin	g this matter to:				
Alexander M. Michelini						
	(Contact Person)					
Emerald Funding One C	orp.					
	(Firm/Company)					
6920 Manasota Key Roa	ad					s
	(Address)				ੱਹੈ - ~	
Englewood, Fl 34223					DEC	ε (* ** (* ) ** (* )
	City, State and Zip Code)				27	: نامد
amichelini@efcmoney.c	om .				<u></u>	*** **********************************
E-mail Address: (to b	oc used for future annual re	port notifications)			ഗ ∺	3 
For further informati	on concerning this ma	tter, please call:			# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Alexander M. Michelini		_at (	չ 474-	1603		
(Name of Conta	act Person)	(Area Code)	(Day	ytime Telephone Number)		
	for the following amou a bank located in the		roces	sed by this office must be pay	yable in U	S
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop	Fees y	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRES	S:	MAILI	NG A	ADDRESS:		
New Filing Section		New Fi				
Division of Corporat	ions			Corporations		
Clifton Building		P. O. B	ox 63	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 <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 Articles of Conversion is: Emerald Funding Partners, LLC
(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, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
March 20, 2006
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Emerald Funding Partners, 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 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.
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 to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 19	day of December	20_18
	orized Representative of Lim	
Signature of Author	orized Representative:	m-That
Printed Name: Alexa	under M. Michelini	Title: Authorized Representative
Triffed Name, Mexi	inder ivi. ivitellellili	THIC, Administrative
		[See below for required signature(s)]
Signature:	M. M.	
Printed Name: Alexa	ander M. Michelini	Title: Authorized Representative
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
rimed rume.		THE.
Signature:		
Printed Name:		Title:
Signature:	·	
Printed Name:	· <del></del>	Title:
Cianona		
Printed Name:		Title:
Timed Name		THE.
If Florida Corpora	ition:	
	nan, Vice Chairman, Director, or	Officer.
	ers have not been selected, an Ir	
If Florida General	Partnership or Limited Liabil	ity Partnership:
Signature of one Ge	eneral Partner.	
If Florida 1 imited	Portnovskip on Limited Linkill	ity Limited Doutnesship.
Signatures of ALL	Partnership or Limited Liabil General Partners	ny Limited Fartnersmp:
oignatures of ABE	General Fatalets.	
All others:		
Signature of an auth	orized person.	
<u>Fees:</u>		
	Conversion:	\$25.00
	orida Articles of Organization:	\$125.00
Certified Co		\$30.00 (Optional)
Certificate	of Status:	\$5.00 (Optional)

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

Emerald Funding Partn			<del></del>
(Mus	st contain the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ado	dress:		
The mailing address	s and street address of th	e principal office of the Limited Lia	bility Company i
Principal Office A	ddress:	Mailing Address:	
6920 Manasota Key Ro	oad	6920 Manasota Key Road	
Englewood, FL 34223			<del></del>
ARTICLE III - Re		Englewood, FL 34223 ered Office, & Registered Agent's	
ARTICLE III - Re The Limited Liability Cor			
ARTICLE III - Re The Limited Liability Cor business entity with an ac	mpany cannot serve as its own R	ered Office, & Registered Agent's egistered Agent. You must designate an individu	
ARTICLE III - Re The Limited Liability Corbusiness entity with an ac	mpany cannot serve as its own Retive Florida registration.)  lorida street address of t	ered Office, & Registered Agent's egistered Agent. You must designate an individu	ual or another
ARTICLE III - Re The Limited Liability Corbusiness entity with an ac	mpany cannot serve as its own Retive Florida registration.)  lorida street address of the Alexander M. Michelini	ered Office, & Registered Agent's a egistered Agent. You must designate an individu the registered agent are:	oal or another
ARTICLE III - Re The Limited Liability Corbusiness entity with an ac	mpany cannot serve as its own Retive Florida registration.)  lorida street address of the Alexander M. Michelini	ered Office, & Registered Agent's egistered Agent. You must designate an individu	ual or another
ARTICLE III - Re The Limited Liability Cor business entity with an ac I'he name and the F	mpany cannot serve as its own Retive Florida registration.)  lorida street address of the Alexander M. Michelini	ered Office, & Registered Agent's a egistered Agent. You must designate an individu the registered agent are:	ual or another  18 REC 27 AH
ARTICLE III - Re The Limited Liability Cor business entity with an ac The name and the F	mpany cannot serve as its own Retive Florida registration.)  lorida street address of the Alexander M. Michelini  N 6920 Manasota Key Road	ered Office, & Registered Agent's a egistered Agent. You must designate an individu the registered agent are:	ual or another  18 REC 27 AH
ARTICLE III - Re (The Limited Liability Corbusiness entity with an ac	mpany cannot serve as its own Retive Florida registration.)  lorida street address of the Alexander M. Michelini  N 6920 Manasota Key Road	ered Office, & Registered Agent's egistered Agent. You must designate an individual he registered agent are:	ual or another  18 PEC 27

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)

ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Emerald Funding Corp.	
	d/b/a Emerald Funding One Corp.	
	6920 Manasota Key Rd, Englewood FL34223	
<del></del>		
(Use attachment if necessary)  CLF V: Other provisions, if any.		
REQUIRED SIGNATURE:	M. M.	
	or an authorized representative of a member	
This document is executed in accordar	nce with section 605.0203 (1) (b), Florida Statutes. I am aware that the Department of State constitutes a third degree felor	
Alexander M. Michelini		
Treatment in the interest in		
	Typed or printed name of signee	

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