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| (Requestor's Name) |
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| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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| TO: | New Filing S Division of C | | | | | |
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| SURI | IFCT: ELM TRI | EE CAPITAL MANAGEN | MENT, LLC | | | |
| .900 | <u>.</u> | (Name of Res | sulting Florida Lin | nited Con | mpany) | |
| | | | | | nd fees are submitted to converce ordence with s. 605.1045. F. | |
| Please | e return all corr | espondence concernin | g this matter to | : | | |
| WOR | TH T. BLACKWE | ELL | | | | |
| | | (Contact Person) | | _ | | |
| THE | BLACKWELL LA | W GROUP PA | | | | |
| | | (Firm/Company) | | | | |
| 146 S | ECOND STREE | T N. SUITE 310 | | | | |
| _ | | (Address) | | _ | | |
| ST. P | ETER\$BURG, F | L 33701 | | | | |
| | (+ | City, State and Zip Code) | - | _ | | |
| WOR' | TH@THEBLACK | WELLLAWGROUP.CO | М | | | |
| E-t | nail Address: (to b | e used for future annual re | port notifications) | _ | | |
| For fi | ırther informati | on concerning this ma | tter, please call | : | | |
| WOR' | TH T. BLACKWE | ELL | at (⁷²⁷ | \480.8 | 8680 | |
| | (Name of Conta | act Person) | (Area Cod | e) (Day | ytime Telephone Number) | |
| | | for the following amou a bank located in the | | process | sed by this office must be paya | ible in US |
| (\$25 fd & \$12. | 50.00 Filing Fees or Conversion 5 (or Articles anization) | □\$155.00 Filing Fees and Certificate of Status | □\$180.00 Filit and Certified C | | ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status | |
| New Divis Clifto 2661 | EET ADDRES Filing Section ion of Corporat on Building Executive Cent hassee, FL 323 | ions er Circle | New Divis P. O. | Filing S ion of C Box 63 | 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.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: ELM TREE CAPITAL MANAGEMENT, LLC |
|---|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) |
| CONNECTICUT, U.S.A. First organized, formed or incorporated under the laws of |
| (Enter state, or if a non-U.S. entity, the name of the country) |
| JANUARY 4, 2010 |
| On |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: ELM TREE CAPITAL MANAGEMENT, LLC |
| (Enter Name of Florida Limited Liability Company) |
| filed date 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. |

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| | 20.40 |
|---|---|
| Signed this 6TH day of MAY | _ <u>20 19 </u> |
| Signature of Authorized Representative of Limit | ed Liability Company: |
| | |
| Signature of Authorized Representative: کسیمیلی | L. Zimone |
| Signature of Authorized Representative: Printed Name: Edward R. Evanouskas | Title: mgr |
| Signature(s) on behalf of Other Business Entity: [S | |
| | |
| Signature: Edmin at 7. Evonounts | |
| Signature: Edward R. Evanouskas | Title: mgr |
| | |
| Signature:Printed Name: | Title: |
| Printed Name: | |
| Signature: | |
| Signature:Printed Name: | _ Title: |
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| Cionaturo: | |
| Signature:Printed Name: | Title: |
| Timed Name | _ |
| Signature: | |
| Signature:Printed Name: | _ Title: |
| ton 11 C author | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C | Officer. |
| If Directors or Officers have not been selected, an Inc | corporator must sign. |
| If Directors of Officers have not occur selected, an in- | ζ |
| If Florida General Partnership or Limited Liabili | ty Partnership: |
| Signature of one General Partner. | |
| • | |
| If Florida Limited Partnership or Limited Liabili | ty Limited Partnership: |
| Signatures of ALL General Partners. | |
| All Alexand | |
| All others: Signature of an authorized person. | |
| 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

| ELM TREE CAPITAL | MANAGEMENT, LLC | 10 0 at 1 C " as \$11 C ") | | | | |
|---|--|--|--------|--|--|--|
| (Mı | ist contain the words "Limited Li | bility Company, "L.L.C.," or "LLC.") | | | | |
| ARTICLE II - Ac | ldress: | | | | | |
| The mailing address | ss and street address of th | e principal office of the Limited Liability Compa | ny is: | | | |
| Principal Office A | Address: | Mailing Address: | | | | |
| 24024 Riverfront Driv | e | 24024 Riverfront Drive | | | | |
| Port Charlotte F∟ 339 | | Port Charlotte FL 33980 | | | | |
| | | | | | | |
| (The Limited Liability C business entity with an | company cannot serve as its own in active Florida registration.) | ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: | | | | |
| (The Limited Liability C business entity with an | Company cannot serve as its own in active Florida registration.) Florida street address of Edward R. Evanouskas | he registered agent are: | | | | |
| (The Limited Liability C business entity with an | Company cannot serve as its own in active Florida registration.) Florida street address of Edward R. Evanouskas | Registered Agent. 19th main designate an incompany | | | | |
| (The Limited Liability C business entity with an | Edward R. Evanouskas | he registered agent are: | | | | |
| (The Limited Liability C business entity with an | Edward R. Evanouskas 24024 Riverfront Drive | he registered agent are: | | | | |
| (The Limited Liability C business entity with an | Edward R. Evanouskas 24024 Riverfront Drive | he registered agent are: Jame P.O. Box <u>NOT</u> acceptable) | | | | |
| (The Limited Liability C business entity with an | Edward R. Evanouskas 24024 Riverfront Drive Florida street address | he registered agent are: | | | | |

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager EDWARD R. EVANOUSKAS MGR Port Charlotte FL (Use attachment if necessary) ARTICLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any faise information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed 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)

Edward R. Evanouskas