# L20000290165

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Gusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



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DECISION OF CORPURATION
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SECTION SEC. FL

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### FLORIDA FILING & SEARCH SERVICES, INC.

#### P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

9/22/20

NAME:

IMPERIAL FUND II, LLC

TYPE OF FILING: CONVERSION

COST:

150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

\* File Second \*

FILED

2020 CEP 22 PH 1: 12

# For "Other Business Entity" Into

# SECRETARY OF STATE TALLAMASSEE, FL

#### 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Imperial Fund II, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
2. The "Other Business Entity is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
February 14, 2014 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:
Imperiat Fund II, 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.

Signature of Authorized Representative:	
Printed Name: Victor Kuznetsov	Title: Authorized Person
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)!
Signature:	
Printed Name: Victor Kuznetsov	Title: Authorized Person
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	201
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	om
Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	
it breetors of officers have not been selected, an int	corporator must sign.
If Florida General Partnership or Limited Liability	ty Partnership:
Signature of one General Partner.	
If Florida Limited Dones 12.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
organization of Apple Concrete Farmers.	
All others:	
Signature of an authorized person.	
12	
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

Imperial Fund II, LLC		
(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC,")	<del></del>
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liab	ility Company is:
Principal Office Address:	Mailing Address:	
1720 Harrison Street, 7th Floor	1720 Harrison Street, 7th Floor	
Hollywood, FL, 33020	Hollywood, FL, 33020	
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)  The name and the Florida street address of t  Imperial Manager II, LLC		SECELLARIASSEC, FL
N	ame	) 22 Ann
1720 Harrison Street, 7th		<i>5</i> % : ⊇
Florida street address (	P.O. Box NOT acceptable)	
Hallywood	Fl. <sup>33020</sup> Zip	12 E
City	Zip	m 'š
Having been named as registered agent as liability company at the place designate registered agent and agree to act in this constantes relating to the proper and comple accept the obligations of my position a	ed in this certificate, I hereby accept th apacity. I further agree to comply with lete performance of my duties, and I an	ne appointment as In the provisions of all In familiar with and

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR	Imperial Manager II, LLC	
	1720 Harrison Street, 7th Floor	
	Hollywood, FL, 33020	
<del></del>		
	-	<u></u>
(Use attachment if necessary)		-
FERTON 11. 10		
LE V: Other provisions, if any.		
REQUIRED SIGNATURE:	Bet-	
Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I a	er .
	: Willi Section 005.0203 (1) (b). Piorida Statutes. La	in aware tha degree felor

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)

ARTICLE IV-