# L21000025994

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

Office Use Only



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FILED 2021 JAN 11 PH 4: 07

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### **COVER LETTER**

Division of C	Corporations					
SUBJECT. Premiun	n Grade Financing, LLC					
SUBJECT.	(Name of Res	sulting Florida Lii	nited Cor	npany)	_	
		-		nd fees are submitted to coordance with s. 605.		
Please return all corr	espondence concernin	g this matter to	o;			
Stuart E. Walker						
	(Contact Person)		_			
Martin Snow, LLP						202
	(Firm/Company)		<del></del>			= 77
P.O. Box 1606					:	7021 JAN 1
	(Address)					
Macon, GA 31202						-0 III
(6	City, State and Zip Code)					i
sewalker@martinsnow	v.com		_			
E-mail Address: (to b	e used for future annual re	port notifications	)			
For further informati	on concerning this ma	tter, please cal	l:			
Curtis H. Ritter		at ( 770	235-	2144		
(Name of Conta	ict Person)		le) (Day	vtime Telephone Number)	_	
	for the following amou a bank located in the	•	proces	sed by this office must	t be pay	able in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180,00 Fili and Certified C	-	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status		
Mailing Add	ress:		Stree	t Address:		
New Filing S	ection		New	Filing Section		
Division of C	-			ion of Corporations		
P.O. Box 632	: <i>1</i>		The (	Centre of Tallahassee		

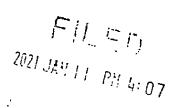
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section

## 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:
Premium Grade Financing, 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.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
11/23/04 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:
Premium Grade Financing, 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 28th	day of December	20
	horized Representative of Lim	
Signature of Auth	norized Representative:	Jacken
Printed Name: Stu	art E. Walker	Title: Attorney
Signature(s) on b	ehalf of Other Business Entity:	[See below for required signature(s)]
Signature:	of He Etter	
Printed Name: Cur	tis H. Ritter	Title: MANGER
7		<del></del>
Printed Name:		Title:
C:		
Printed Name:		Title:
rimed rame		
Signature:		2333333
Printed Name:		Title:
Signature:		Tido
rnnted Name:		Title:
Signature:		
Printed Name:	•	Title:
If Florida Corpor		om
_	man, Vice Chairman, Director, or icers have not been selected, an In	
ii Directors of Off	icers have not been selected, an in	corporator must sign.
If Florida Genera	al Partnership or Limited Liabili	ity Partnership:
Signature of one C		<del></del>
	d Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALI	General Partners.	
All others:		
Signature of an au	thorized person.	
_	·	
Fees:		
		225.00
	f Conversion:	\$25,00
Certified (	lorida Articles of Organization:	\$125.00 \$30.00 (Optional)
	e of Status:	\$5.00 (Optional)
o, mode	o. Status.	Total (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ited Liability Company		
Premium Grade Finan	cing, LLC		
(Must	contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addi	ress:		
The mailing address	and street address of th	e principal office of the Limited Lia	bility Company is:
Principal Office Ad	dress:	Mailing Address:	
340 176th Ave Circle		340 176th Ave Circle	
			<del></del>
Reddington Shores, Fl		Reddington Shores, FL 33708	
ARTICLE III - Reg	istered Agent, Registe	Reddington Shores, FL 33708  red Office, & Registered Agent's egistered Agent. You must designate an individ	
ARTICLE III - Reg (The Limited Liability Com- business entity with an acti	istered Agent, Registe	ered Office, & Registered Agent's egistered Agent. You must designate an individ	ual or another
ARTICLE III - Reg (The Limited Liability Com- business entity with an acti The name and the Flo	istered Agent, Registe pany cannot serve as its own R ive Florida registration.)	ered Office, & Registered Agent's egistered Agent. You must designate an individ	ual or another
ARTICLE III - Reg (The Limited Liability Com- business entity with an acti The name and the Flo	istered Agent, Register pany cannot serve as its own Rive Florida registration.) perida street address of the	ered Office, & Registered Agent's egistered Agent. You must designate an individ	
ARTICLE III - Reg (The Limited Liability Combusiness entity with an acti The name and the Flo	istered Agent, Register pany cannot serve as its own Rive Florida registration.) perida street address of the	ered Office, & Registered Agent's egistered Agent. You must designate an individue registered agent are:	nal or another
ARTICLE III - Reg (The Limited Liability Combusiness entity with an action The name and the Flo	istered Agent, Register pany cannot serve as its own Registration.)  orida street address of the curtis H. Ritter  N  140 176th Ave Circle	ered Office, & Registered Agent's egistered Agent. You must designate an individue registered agent are:	nal or another
ARTICLE III - Reg (The Limited Liability Com- business entity with an acti The name and the Flo	istered Agent, Register pany cannot serve as its own Registration.)  orida street address of the curtis H. Ritter  N  140 176th Ave Circle	ered Office, & Registered Agent's egistered Agent. You must designate an individue ne registered agent are:	nal or another

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:

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Custin U. Dittor
MGR	Curtis H. Ritter 340 176th Ave Circle
	Reddington Shores, FL 33708
	Reddington Sholes, FL 33700
<del></del>	
	<del> </del>
<del> </del>	
LLICA ATTACHMANT IT HACACCAMIL	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
•	
ICLE V: Other provisions, if any.  REQUIRED SIGNATURE:	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	titte, more
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance	
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a document	
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817,155, F.S.  Curtis H. Ritter	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that

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