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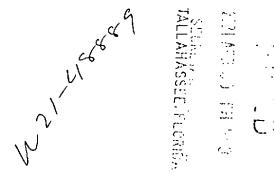
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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T. BLARCH MAY 3 2021

#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Triton North Holdings LLC (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Antonio Ortiz (Contact Person)  Triton North Holdings UC (Firm/Company)
2050 Coral Way, Ste 306 (Address)
Miami, FL, 33145 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Antonio Ortiz at (786 ) 338-3367 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$\sum_{150.00}\$ Filing Fees (\$\sum_{150.00}\$ Filing Fees and Certificate of and Certified Copy of Organization) \$\sum_{150.00}\$ Filing Fees and Certified Copy and Certificate of Status \$\sum_{150.00}\$ Filing Fees and Certified Copy and Certificate of Status
Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



April 12, 2021

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ANTONIO ORTIZ 2050 CORAL WAY STE 306 MIAMI, FL 33145

SUBJECT: TRITON NORTH HOLDINGS LLC

Ref. Number: W21000048889

We have received your document for TRITON NORTH HOLDINGS LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 621A00007490

Tim Burch Senior Section Administrator

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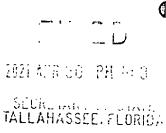
# **Articles of Conversion**

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.

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 26 day of February	20_2!
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative of Limi  Signature of Authorized Representative:  Printed Name: Antonio Ortiz	Title: HGZ
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Printed Name: And Oliver 17	
Signature:Printed Name:	ļ
rinica Name:	1 ttle:
Signature: Printed Name:	Title:
Signature: Printed Name:	_ Title:
Signature: Printed Name:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilio	ty Partnership:
Signature of one General Partner.	<u> </u>
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person,	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The	name	of the	Limited	Liability	Comp

pany is:

Triton	North	Holdings	LLC
	(Must contain t	he words "Limited I	Liability Company, "L.L.C.," or "L1.C.")

#### ARTICLE II - Address:

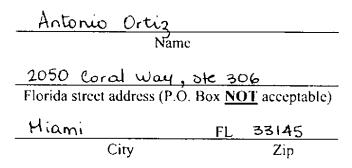
**ARTICLE 1 - Name:** 

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
2050 Coral Way, ste 306	2050 Coral Way, ste 306
Migmi, FL, 33145	Hiami, FL, 33145

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:



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 (REOURED)

## **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 いる?	Antonia Octio
	Antonio Ortiz 2050 Coral Way, STE 306
	Hiami, FL, 33145
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(Use attachment if necessary)	<del></del>
LE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member with section 605 0203 (1) (b) Florida Statutes I am aware
REQUIRED SIGNATURE:  Signature of a member or: This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree for
Signature of a member or: This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware nent to the Department of State constitutes a third degree for
Signature of a member or: This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.  Antonio Octiz	with section 605,0203 (1) (b), Florida Statutes, Lam aware