L21000193094

(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:

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03/30/21--01022--003 **150.90

5-21 F 133 P 1552

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Orca Capital, L	LC
(Name of Resultin	g Florida Limited Company)
The enclosed Articles of Conversion, Articles of Business Entity" into a "Florida Limited Liabil	of Organization, and fees are submitted to convert an "Othe ity Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning th	is matter to:
Whitney Loftus (Contact Person)	ر ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا
	υP
Capital Fund Law Gro (Firm/Company)	ωρ 🗓
(Firm/Company)	
1700 Broadway 41 St Fl	oor E
(Address)	
New York, NY 10019	
(City, State and Zip Code)	
info@capitalfundlo	lw.com
E-mail Address: (to be used for future annual report	
For further information concerning this matter	, please call:
(Name of Contact Person)	(212) 203-4300 (Area Code) (Daytime Telephone Number)
,	(All checks processed by this office must be payable in US
\$\sum_{\text{\$\subset}} \S150.00 \text{ Filing Fees} \text{and Certificate of and Status} \\ \text{\$\subseteq} \S125 \text{ for Articles of Organization} \\ \text{\$\subseteq} \S155.00 \text{ Filing Fees and Certificate of Status} \\ \text{\$\subseteq} \S125 \text{ for Articles of Organization} \\ \text{\$\subseteq} \S155.00 \text{ Filing Fees and Certificate of Status} \\ \text{\$\subseteq} \S125 \text{ for Articles of Organization} \\ \text{\$\subseteq} \S155.00 \text{ Filing Fees and Certificate of Status} \\ \text{\$\subseteq} \S125 \text{ for Articles of Organization} \\ \text{\$\subseteq} \S125 for Articles of Organiza	IS180,00 Filing Fees
Mailing Address:	Street Address:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

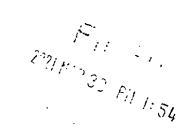
Tallahassee, FL 32303

Tallahassee, FL 32314

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Orca Capital, 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.
(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)
07/11/2019 on .
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:
Orca Capital, 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	day of	3/23/2021	
_			
Signature of Authori	ized Represo	entative of Limit	ted Liability Company:
Signature of Authorize	ed Represent	ative:	アンテー Title: Manager
Printed Name: Jeffrey S	Sekinger		Title: Manager
Signature(s) on behal	f of Other B	usiness Entity:	See below for required signature(s)]
() di	, 3/L		
Signature: 77.59	19/21/29~		Title: Manager
Printed Name: Jenrey S	sexinger		Title: Manager
Signature:	68-D		
Printed Name: Austin B	larnard		Title: Manager
r (inted rainte.			
Signature:	<u></u>		
Printed Name:			Title:
Signature:			Title:
Printed Name:			ritte:
Cianatura:			
Printed Name:	<u> </u>		Title:
Signature:			
Printed Name:			Title:
If Florida Corporation Signature of Chairman	<u>)n:</u> - Vias Chaim	uan Director or	Officer
If Directors or Officers			
If Directors of Officer.	s have not be	en serected, an in	to portator matering.
If Florida General Pa	artnership or	Limited Liabili	ty Partnership:
Signature of one Gene			
_			
If Florida Limited Pa	artnership or	· Limited Liabili	ty Limited Partnership:
Signatures of ALL Ge	eneral Partner	S.	
A II 4 b come			
All others: Signature of an author	rized nerson		-
Signature of an author	nico perocii.		
Fees:			
_ 			
Articles of Co			\$25.00
		f Organization:	\$125.00
Certified Cop	•		\$30.00 (Optional)
Certificate of	Status:		\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N The name of the	Name: : Limited Liability C	Company is:	
Orca Capital, LLC		Limited Liability Company, "L.L.C" or "I	.L.C.")
ARTICLE II - The mailing add		ess of the principal office of the	Limited Liability Company is:
Principal Offic	e Address:	Mailing Address:	
495 Brickell Ave,	#4101	495 Brickell Ave, #4	101
Miami, Florida 33	131	Miami, Florida 3313	1
The name and th	ne Florida street add Jeffrey R. Seking	ress of the registered agent are: er Name	30 PH
	495 Brickell Ave,	#4101	45
	Florida street a	ddress (P.O. Box <u>NOT</u> acceptab	ole)
	Miami	FL ³³¹³¹	
	C	City Zip	
liability co. registered age statutes rela	mpany at the place dent and agree to act in ting to the proper and obligations of my po	lesignated in this certificate. I her	o comply with the provisions of all time, and I am familiar with and vided for in Chapter 605, F.S

(CONTINUED)

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

Name and Address:

Little:	Name and Address.
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Jeffrey Sekinger
	495 Brickell Ave, #4101
	Miami, Florida 33131
MGR	Austin Barnard
	495 Brickell Ave, #4101
	Miami, Florida 33131
<u></u>	
(Use attachment if necessary)	
(Ose attachment if necessary)	
CLE V: Other provisions, if any.	
,	
REQUIRED SIGNATURE:	
	and the second s
Signature of a member o	r an authorized representative of a member se with section 605.0203 (1) (b). Florida Statutes. I am aware
any false information submitted in a doc	nument to the Department of State constitutes a third degree for
as provided for in s.817.155, F.S.	
	(110)1.
Jeffrey Sekinger	アナリウ - 4/25ペン
	7/10 g/20g-
Т	yped 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)