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PICK-UP WAIT MAIL				
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Special Instructions to Filing Officer;				
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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: BLUE BAY CAPTIAL 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:				
EDWIN D. EPPERSON TL (Contact Person)				
BLUE BAY CAPITAL (Firm-Company)				
7901 4th ST. NORTH STE 4410 (Address)				
ST. PETERS BURG. FL 33702 (City, State and Zip Code) Edwin e bbcfunding.com				
E-mail Address: (to be used for future assual report notifications)				
For further information concerning this matter, please call:				
EDWIN D. EPPENSON at (813) 901-4082 .x101 (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)				
☐ \$150.00 Filing Fees (\$25 for Conversion & Status Status ☐ \$155.00 Filing Fees and Certified Copy Status ☐ \$185.00 Filing Fees, Certified Copy, and Certificate of Status				
Mailing Address: Street Address:				
New Filing Section New Filing Section				
Division of Corporations Division of Corporations The Corporations				
P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303



May 21, 2021

EDWIN EPPERSON 7901 4TH ST N STE 4410 ST. PETERSBURG, FL 33702

SUBJECT: BLUE BAY CAPITAL LLC

Ref. Number: W21000073410

We have received your document for BLUE BAY CAPITAL LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tim Burch Senior Section Administrator

Letter Number: 121A00010854

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 \$.605.1045, Florida: Statutes.

Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: VERTUAL FUND MANAGEMENTCOR
(Enter Name of Other Business Entity) $0.17 - 9.3140$
2. The "Other Business Entity" is a <u>CORPORATEON</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of FLORIDA. (finter state, or if a non-U.S. entity, the name of the country)
on 21th NOVEMBER 2017 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BLUE BAY CAPETALLIC (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 fisted 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 of Limi	ted Liability Company:
Simulation of Boundaries (M)	la Com -
Signature of Authorized Representative:	Title: MANAGER
Signature(s) on behalf of Other Business Entity: [
3/2	
Signature: Printed Name: EDWN N. EPPERSON TH	Title: PRESEDENT.
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
	ty Partnership:
If Florida General Partnership or Limited Liabili	
Signature of one General Partner. If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signature of one General Partner. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
Signature of one General Partner. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others:	ty Limited Partnership:
Signature of one General Partner. If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signature of one General Partner. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	
Signature of one General Partner. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others: Signature of an authorized person.	\$25.00 \$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	y Company is:			
BLUE BAY CAPITA (Must conta	IL LLC in the words "Limited Liz	bility Company, "	L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the principal offic	ce of the Limited I	Liability Company is:	
Princips	l Office Address:		Mailing Address:	
7901 4TH ST N.		1904	6 BRUCE B. DOWNS BLVD #413	
ST. PETERSBURG		TAM	IPA	
FLORIDA 33702		FLO	RIDA 33647	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street a	cannot serve as its own Rective Florida registration.)	egistered Agent. Y	ou must designate an individual or	
Registered Agents Inc				
Name				
	7901 4TH ST N. Ste 300			
Florida street address (P.O. Box NOT acceptable)				
	ST. PETERSBURG	FLORIDA	33702	
	City	State	Zip	
			above stated limited liability company at the	

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..

(CONTINUED)

Registrated Agent's Signature (REQUIRED)

The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title:
"AMBR" = Authorized Member "MGR" = Manager EDWIN D EPPERSON III 19046 BRUCE B. DOWNS BLVD #413 TAMPA, FL 33647 **MGR** (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) 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. ARTICLE VI: 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 false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

EDWIN D. EPPERSON III

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)