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(R	equestor's Name)	
(A	ddress)	
(Ā	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
i		

Office Use Only



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COVER LETTER

SUBJECT: Dolger Fi	nance LLC			
Jebule1	(Name of Res	ulting Florida Limite	d Com	npany)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
Yehuda Frid				
	(Contact Person)	<u> </u>		
George D. Perlman P.	۹.			
	(Firm/Company)			
1441 Brickell Ave, Suit	e 1400			
	(Address)			
Miami, FL 33131				
(0	City, State and Zip Code)			
yehuda@gplawintl.com	n			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
Yehuda Frid		_at (³⁰⁵	3755	646
(Name of Conta	ect Person)	(Area Code)	(Day	rtime Telephone Number)
	or the following amou a bank located in the		rocess	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cop		Certified Copy, and Certificate of Status
Mailing Add New Filing S	ection		New I	t Address: Filing Section
Division of C	ырогацопу		DIVIS	ion of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

TO: New Filing Section

Division of Corporations

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: Dolger Finance Limited
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
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)
01/04/2016 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: Dolger Finance 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.

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

 \cup

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Dolger Finance LLC				
(Must co	ontain the words "Limited Lia	hility Company, "L.	L.C.," or "L.L.C.")	
ARTICLE II - Addre	ess:			
The mailing address a	nd street address of the	e principal offic	e of the Limited Lie	ibility Company is
Principal Office Add	ress:	Mailing A	Address:	
1441 Brickell Ave, Suite	1400	1441 Brick	cell Ave, Suite 1400	
		Miami, FL		
ARTICLE III - Regi	stered Agent, Registerany cannot serve as its own Referred aregistration.)	ered Office, &	Registered Agent's	dual or another
ARTICLE III - Regi The Limited Liability Comp business entity with an activ	any cannot serve as its own R	ered Office, & egistered Agent. Yo	Registered Agent's u must designate an indivi	dual or another
ARTICLE III - Regi The Limited Liability Comp business entity with an activ The name and the Flo	any cannot serve as its own Reversition.) rida street address of the eorge D. Perlman P.A.	ered Office, & egistered Agent. Yo	Registered Agent's u must designate an indivi	Signature: dual or another
ARTICLE III - Regi The Limited Liability Comp business entity with an activ The name and the Flo	any cannot serve as its own Reversition.) rida street address of the eorge D. Perlman P.A.	ered Office, & egistered Agent. Yo	Registered Agent's u must designate an indivi	dual of another
The Limited Liability Compositions on the Eliability with an active The name and the Flo	any cannot serve as its own Reversition.) rida street address of the eorge D. Perlman P.A.	ered Office, & egistered Agent. Yo he registered ag	Registered Agent's u must designate an indivi	dual of another
ARTICLE III - Regi The Limited Liability Compositions entity with an activ The name and the Flo Ge	enny cannot serve as its own Reverse Florida registration.) rida street address of the eorge D. Perlman P.A. N	ered Office, & egistered Agent. Yo he registered agame	Registered Agent's au must designate an indivi	dual of another
ARTICLE III - Regi The Limited Liability Comp business entity with an activ The name and the Flo Ge	enry cannot serve as its own Reverse Florida registration.) rida street address of the eorge D. Perlman P.A. No. 1441 Brickell Ave., Suite 14	ered Office, & egistered Agent. Yo he registered agame	Registered Agent's au must designate an indivi	dual of 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)

	N d Addmine:
Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Hillel Waxman
MGR	1441 Brickell Ave, Suite 1400
	Miami, FL, 33131
	Tributity Clay 22 . 2.
711 1	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
DE V. Otter provisions, it any.	
REQUIRED SIGNATURE:	
\mathcal{A}	
<i>[,</i>	and the simulation of a momban
This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware
any false information submitted in a doct	iment to the Department of State constitutes a third degree fe
any later intermation and interest and	
as provided for in s.817.155, F.S.	

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

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-