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(Re	questor's Name)	
bA)	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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D	Acc#120160000072
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Name:	Pareto Frontier Capital Holdings, LLC
Document #:	
Order #:	14122774
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:	
Certified Copy of	
Apostille/Notarial Certification:	Country of Destination: Number of Certs:
Filing: 🚺	Certified: ☐ Plain: ✓ COGS: ☐
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 150.00

Thank you!

COVER LETTER

TO:	New Filing Se Division of C				
CHDI	LECT. PARETO	FRONTIER CAPITAL H	IOLDINGS, LLC		
SUD	rect.	(Name of Res	ulting Florida Limi	ted Con	npany)
The e Busin	nclosed Article less Entity" into	s of Conversion, Articl a "Florida Limited Li	les of Organizati ability Company	ion, an	d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corr	espondence concerning	g this matter to:		
ALAN	WALDMAN				
		(Contact Person)		_	
		(Firm/Company)		-	
323 S	UNNY ISLES BC	DULEVARD, SUITE 505		_	
		(Address)			
SUNN	IY ISLES BEACH	H, FL 33160			
	((City, State and Zip Code)		_	
ALAN	@PARETOFRO	NTIER.AI		_	
E-r	nail Address: (to b	e used for future annual re	port notifications)	_	
For fi	ırther informati	on concerning this ma	tter, please call:		
ALAN	WALDMAN		_at (<u>3</u> 05)333-0	900
	(Name of Conta	ect Person)	(Area Code) (Day	time Telephone Number)
		or the following amou a bank located in the		process	sed by this office must be payable in US
(\$25 fo & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, 1	ection Torporations 17		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

<u>Articles of Conversion</u>

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:

PARETO FRONTIER CAPITAL LTD.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a business company limited by shares (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)
June 17, 2021 on (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PARETO FRONTIER CAPITAL HOLDINGS, 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	s 26h day of January	20 <u>22</u>
Signature	of Authorized Representative of	Limited Liability Company:
	of Authorized Representative:	
Signature of	of Authorized Representative: 🔼	
Printed Na	me:Alan Waldman	Title: Manager
Signature((s) on behalf of Other Business En	tity: [See below for required signature(s)]
Signature:	Son	
Printed Nai	me [.] Alan waloman	Title: Director
Signature:	imilhelion	
Printed Na	me:llya Mikhelson	Title: Director
Signature:		Title:
Printed Na	me:	I ille:
Signature:		
Printed Na	me:	Title:
Signature:		Title:
Printed Na	me:	Title:
Sionature:		
Printed Na	 me:	Title:
	Corporation:	
	of Chairman, Vice Chairman, Direct	
If Directors	s or Officers have not been selected.	an Incorporator must sign.
1f Florida	General Partnership or Limited I	inhility Partnership
	of one General Partner.	mannity rattices in p.
Ü		
	Limited Partnership or Limited L	<u>jability Limited Partnership:</u>
Signatures	of ALL General Partners.	
All athore		
All others:	t of an authorized person.	
is ignature t	with the control of t	
Fees:		
Λri	ticles of Conversion:	\$25.00
	es for Florida Articles of Organizat	
	rtified Copy:	\$30.00 (Optional)
	rtificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
, ,	•
PARETO FRONTIER CAPITAL HOLDINGS	, LLC
(Must contain the words "Limite	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
323 SUNNY ISLES BOULEVARD	323 SUNNY ISLES BOULEVARD
SUITE 505	SUITE 505
SUNNY ISLES BEACH, FL 33160	SUNNY ISLES BEACH, FL 33160
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: wen Registered Agent. You must designate an individual or another
701 Lat. 121 Cd. average addresses	of the registered agent are:
The name and the Florida street address	
ALAN WALDMAN	

323 SUNNY ISLES BOULEVARD, SUITE 505

Florida street address (P.O. Box NOT acceptable)

SUNNY ISLES BEACH FL 33160

City Zip

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)



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as provided for in s.817.155, F.S.

ALAN WALDMAN

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	AL ANDROAL DATAM		
MGR	ALAN WALDMAN		
	323 SUNNY ISLES BOULEVARD, SUITE 505		
	SUNNY ISLES BEACH, FL 33160		
MGR	ILYA MIKHELSON		
	323 SUNNY ISLES BOULEVARD, SUITE 505		
	SUNNY ISLES BEACH, FL 33160		
MGR	RODRIGO BENZAQUEN		
WOI	ZABALA 2434 APT. E		
	BUENOS AIRES, ARGENTINA, 1438		
(Use attachment if necessary)			
CLE V: Other provisions, if any.			
REQUIRED SIGNATURE:			
Slow			
	<u> </u>		
Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aw		
i ins document is executed in accordance	, with Section 605.0205 (1) (6), Florida Statutes. I am awa		

Typed or printed name of signee

Filing Fees

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

any false information submitted in a document to the Department of State constitutes a third degree felony