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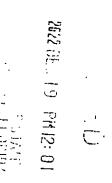
(Requestor's Name)
(Address)
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,
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(,
Codifical Continues of Continue
Certified Copies Certificates of Status
Special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

то:	New Filing Se Division of Co					
eum i		rowth Fund II LLC				
SUBJ	ECT:	(Name of Res	ulting Florida Limit	ed Com	pany)	
					d fees are submitted to convert an ecordance with s. 605.1045, F.S.	Othe
Please	e return all corre	espondence concerning	g this matter to:			
Paula	Barnett					
		(Contact Person)		-		
Pino M	Nicholson PLLC					
-		(Firm/Company)		_		
99 S.	New York Ave.					
		(Address)		=		
Winte	r Park, FL 32789	9				
	(0	City, State and Zip Code)		-		
pbarn	ett@pinonicholsc	onlaw.com				
E-1	nail Address: (to b	e used for future annual re	port notifications)	-		
For fu	irther information	on concerning this ma	tter, please call:			
Paula	Barnett		_at (425-7	7831 ext. 108	
	(Name of Conta	ct Person)) (Day	time Telephone Number)	
		or the following amou a bank located in the		process	ed by this office must be payable i	n US
(\$25 fd & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 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, I	ection orporations 7		New I Divisi The C	t Address: Filing Section Fion of Corporations Fentre of Tallahassee N. Monroe Street, Suite 810	C) D

Tallahassee, FL 32303

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.

(Enter Name of Other Business Entity)	
2. The NOther Dusings United limited liability company	
(Enter entity type. Example: corporation, limited partnership, general p	partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a n	ion-U.S. entity, the name of the country)
February 3, 2022 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the	c attached Articles of Organization:
Tempo Growth Fund II 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 no	or 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 req	ordenses and a third due a could have be allowed as a bi-
document's effective date on the Department of State's records.	uirements, this date will not be listed as the
5. The plan of conversion has been approved in accordance with all appl	icable statutes.
 The "Converted or Other Business Entity" has agreed to pay any member which such members are entitled under ss. 605.1006 and 605.1061-605.1 	rs having appraisal rights the amount to 1072, F.S.
 The "Converted or Other Business Entity" has agreed to pay any member which such members are entitled under ss. 605.1006 and 605.1061-605.1 	1072, F.S.
 The "Converted or Other Business Entity" has agreed to pay any member which such members are entitled under ss. 605.1006 and 605.1061-605.1 	1072. F.S. . 28
 The "Converted or Other Business Entity" has agreed to pay any member which such members are entitled under ss. 605.1006 and 605.1061-605.1 	1072, F.S.

Signed this 12th day of December	20_ _22
Signature of Authorized Representative-of-Limi	ted Liability Companyնատ
	Mikhail Zlotnik
Signature of Authorized Representative:	
Printed Name: Mikhail Zlotnik	Title: Manager
Signature(s) on behalf of Other Business Entity	See below for required signature(s)
Signature: Mikhail Zlotnik Printed Name: Mikhail Zlotnik	
Printed Name: Mikhail Zlotnik	Title: Manager
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
O' .	
Signature:	T'.1
Printed Name:	I itle:
Signature	
Signature: Printed Name:	Title:
Trined rane.	THIC.
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.
If Florida Consul Dustannukin on Limited Linkin	And December 1975
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty rartnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnershin:
Signatures of ALL General Partners.	
	
All others:	
Signature of an authorized person.	
Fees:	
A () ()	605.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	:		
The name of the Limi	ted Liability Company	is:	
Tempo Growth Fund II			
(Must c	ontain the words "Limited Liab	bility Company, "L.L.C.," or "LLC	l.")
ARTICLE II - Addr The mailing address a		principal office of the Li	mited Liability Company is:
Principal Office Add	lress:	Mailing Address:	
99 S. New York Ave.		P.O. Box 1750	
Winter Park, FL 32789		Winter Park, FL 32790	
The name and the Flo		egistered Agent. You must designa	te an individual or another
_	Na	ime	_
ge	9 S. New York Ave.		
-		P.O. Box NOT acceptable)
w	inter Park	FL 32789	
_	City	Zip	_
liability company registered agent and statutes relating to	y at the place designated d agree to act in this cap o the proper and comple stions of my position as Registered Ageny's S	d in this certificate, I hereb pacity. I further agree to co te <u>perform</u> ance of <u>my duti</u> e	ess for the above stated limited y accept the appointment as omply with the provisions of all es, and I am familiar with and at for in Chapter 605, F.S

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager	
MGR - Manager MGR	TF Management Group LLC 99 S. New York Ave. Winter Park, FL 32789
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE	Mikhail Blotnik

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

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

Mikhail Zlotnik

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)