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(Requestor's Na	me)
(Address)	
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(City/State/Zip/P	hone #)
PICK-UP WAIT	MAIL.
(Business Entity	Name)
(Document Num	der)
Certified Copies Certific	ates of Status
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COVER LETTER

TO:	New Filing Section Division of Corporation	ns
SHRJ	IECT: Blacktree Investme	nt Group LLC
130130		(Name of Resulting Florida Limited Company)
The e Busin	nclosed Articles of Conve less Entity" into a "Florid	rsion, Articles of Organization, and fees are submitted to convert an "Other Limited Liability Company" in accordance with s. 605.1045, F.S.
Please	e return all correspondenc	e concerning this matter to:
	Mauricio Rauld	
	(Contact	Person)
	Premier Law Group	
	(Firm/Co	mpany)
	1810 S El Camino Real.	Suite E
	(Add	ress)
	San Clemente, CA 9267	2
	(City, State a	nd Zip Code)
cs@p	olglp.com	
E-1	mail Address: (to be used for f	uture annual report notifications)
For fu	urther information concer	ning this matter, please call:
	Maurico Rauld	at (949) 258-2339
	(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclo dollar	osed is a check for the follers and drawn on a bank lo	lowing amount: (All checks processed by this office must be payable in US scated in the United States)
(\$25 fo & \$12	50.00 Filing Fees Status (anization)	0 Filing Fees
	Mailing Address: New Filing Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

PLEASE USE FUNDS FROM	I ACCT: 120210000160 AMOUNT: \$ 185.00
AUTHORIZATION: Blacktree Investment Group LI Business Name	Document Number, (if known):
Walk in Mail out	Pick up time Will wait Photocopy
_X_Certified Copy of Article _X_Certificate of Status	es of Incorporation
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other CORP PLLC	AmendmentResignation of R.A. Officer/Director Change of Registered Agent DissolutionMerger XConversionStatement of Revocation of Dissolution
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing Limited Partnership Reinstatement
APOSTIL()Country	Other

EXAMINIER'S INITIALS:

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: Blacktree Investment Group, LLC (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) California First organized, formed or incorporated under the laws of _ (Enter state, or if a non-U.S. entity, the name of the country) 02/16/2018 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: Blacktree Investment Group, 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 28th	day of December_	2022
Signature of Author	rized Representativ	ve of Limited Liability Company:
		/
Signature of Authori	zed Representative:	(aulo)
Signature of Authori Printed Name: Maurici	io Rauld	Title: Authorized Representative
Signature(s) on beha	of Other Business	s Entity: [See below for required signature(s)]
	1 1	
Signature:	"(COULD)	Title: Authorized Representative
Printed Name: Ma	uncio-hauid	Title: Additionized Representative
Signature:		
Signature:	-	Title:
Timed Name		
Signature:		
Printed Name:		Title:
		
Signature:		
Printed Name:		Title:
Signature:		an' I
Printed Name:	 -	Title:
C		
Signature:		Title:
rmined Name.		Title.
If Florida Corporati	on:	
Signature of Chairma		irector, or Officer.
		cted, an Incorporator must sign.
		ted Liability Partnership:
Signature of one Gen	eral Partner.	
		ted Liability Limited Partnership:
Signatures of <u>ALL</u> G	eneral Partners.	
A 11 o Albomos		
All others: Signature of an autho	rived person	
Signature of an addito	rized person.	
Fees:		
Articles of C	onversion	\$25.00
Fees for Flor	ida Articles of Organ	
Certified Cor	oy:	\$30.00 (Optional)
Certificate of	`Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Nam	 1 e :			
	mited Liability Company	y is:		
Blacktree Investment				
(Mus	st contain the words "Limited Li	ability Company,	"L.L.C" or "LLC.")	
ARTICLE II - Add	dress.			
	s and street address of th	e principal o	ffice of the Limited	d Liability Company is:
J				<i>y</i> • • • • • • • • • • • • • • • • • • •
Principal Office A	ddress:	<u>Mailin</u>	g Address:	
				
1317 Edgewater Dr.			dgewater Dr.	
Ste 1536	 	Ste 153		
Orlando, FL 32804		Orlando	o, FL 32804	
ADTICLE HL Da	 gistered Agent, Registe	amad ()ffica	& Dogistared Age	ntia Cianatura.
	mpany cannot serve as its own F			
	ctive Florida registration.)		2	
The name and the F	 lorida street address of t	he registered	agent are:	
The name and the r	ionda sirect address or t	ne registered	agent are.	1
	Registered Agents, Inc.			∫ ;
		lame		0
				-
	7901 4th Street N., Suite	e 300		f ::
	Florida street address (P.O. Box <u>NC</u>	T acceptable)	·
	St. Petersburg	FL	33702	
•	City	<u></u>	Zip	.
	ned as registered agent ai my at the place designate			or the above stated limited tent the appointment as
				y with the provisions of all
	1 37			d I am familiar with and
accept the obli	igations of my position $lpha$	s registered a	gent as provided fo	r in Chapter 605, F.S.,
	/s/ Bill H	avre		
		O1 (D)	COLUBER	
	Registered Agent's	Signature (RI	EQUIRED)	
	(CONT	PENHINETAN		
	(CON	TINUED)		

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AP	Mauricio Rauld 1810 S El Camino Real, Suite E
	San Clemente, CA 92672
j	
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	0 l
	aulo
Signuture of a member or	an authorized representative of a member
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am award ment to the Department of State constitutes a third degree in the control of the Department of State constitutes as the degree in the control of