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| (Requestor's Name) |
|---------------------------------------|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| ied Copies Certificates of Status |
| cial Instructions to Filing Officer: |
| cial instructions to rilling Officer. |
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Office Use Only



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S. CHATHAM

DIVISION OF CORPORATIONS

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2023 JAN 23 PH 4: 05

FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE Division of Corporations

TALLAHASSEE, FLORIDA

January 23, 2023

COGENCY GLOBAL INC.

SUBJECT: ROWAN INTERNATIONAL, LLC

Ref. Number: W23000002708

Please accept our apology for failing to mention this in our previous letter.

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.

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

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 323A00001551



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301

P: 866.625.0838 F: 866.625.0839

COGENCYGLOBAL.COM

Account#: I20000000088

| Date: | 01/23/2023 | |
|--------------|-----------------------------------|-------------------------------|
| Name: | Greg Pintacuda | |
| Referenc | e #:1880581 | |
| Entity Na | me:ROWAN I | NTERNATIONAL, LLC |
| ⊘ Art | ticles of Incorporation/Authoriza | ation to Transact Business |
| An | nendment | Please use original file date |
| Ch | nange of Agent | OF 1/10/2623 |
| ☐ Re | einstatement | , |
| ✓ Co | onversion | |
| □ Ме | erger | |
| ☐ Dis | ssolution/Withdrawal | |
| ☐ Fic | ctitious Name | |
| ☐ Otl | her | |
| | | |
| Authorize | ed Amount: \$150 | |
| Signature | ·· Ante | |

F: 800.944.6607

Articles of Conversion For "Other Business Entity"

Into

Florida Limited Liability Company

DIVISION OF CONTORUNG

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.

| l. | ROWAN INTERNATIONAL, LLC |
|-------------|--|
| | (Enter Name of Other Business Entity) |
| 2. | The "Other Business Limited Liability Company |
| | Entity" is Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) |
| Fir | rst organized, formed or incorporated under the laws ofILLINOIS |
| | (Enter state, or if a non-U.S. entity, the name of the country) |
| on | MAY 7, 2008 |
| | (date of organization, formation or incorporation) |
| | The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| | (Enter Name of Florida Limited Liability Company) |
| 4. | If not effective on the date of filing, enter the effective date: |
| th | he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after e date this document is filed by the Florida Department of State.) |
| | te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the sument's effective date on the Department of State's records. |
| 5. <i>*</i> | 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 12TH day of JANUARY | |
|---|--|
| Signature of Authorized Representative of Limi | |
| Signature of Authorized Representative Printed Name: ROCHELLE ROWAN | Title: MANAGER |
| Signature(s) on behalf of Other Business Entity: | [See below for required signature(s)] |
| Signature: Printed Name: ROCHELLE ROWAN | |
| Printed Name: ROCHELLE ROWAN | Title: MANAGER |
| Signature | |
| Signature:Printed Name: | |
| | |
| Signature: Printed Name: | Title: |
| | |
| Signature:Printed Name: | Title |
| Filinet Name. | |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc. | |
| If Florida General Partnership or Limited Liability Signature of one General Partner. | ty Partnership: |
| If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners. | ty Limited Partnership: |
| All others: Signature of an authorized person. | |
| Fees: | |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company i | is: |
|--|--|
| ROWAN INTERNATIONAL, LLC | |
| (Must contain the words "Limited Liabi | ility Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the | principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 13055 UTOPIA LOOP | 13055 UTOPIA LOOP |
| BRADENTON, FL 34211 | BRADENTON, FL 34211 |
| (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the | |
| | e registered agent are. |
| COGENCY GLOBAL INC. Nam | me |
| | |
| 115 NORTH CALHOUN ST., S | |
| riorida sueet address (r.: | .O. Box <u>NOT</u> acceptable) |
| TALLAHASSEE | FL 32301 |
| City | Zip |
| liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete | I to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S. |
| /s/ Shannon M. Ma | addox 70 95 |
| Registered Agent's Sig | addox gnature (REQUIRED) |

ARTICLE IV-

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 | |
| MGR | ROCHELLE ROWAN |
| | 13055 UTOPIA LOOP |
| | BRADENTON, FL 34211 |
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| (Use attachment if necessary) | |
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| LE V: Other provisions, if any. | |
| | |
| | |
| | |
| | • |
| REQUIRED SIGNATURE: | |
| - Loren Ross | |
| Way our | \sim |

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 8.817.155, F.S.

ROCHELLE ROWAN

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)