L23000258267

(F	Requestor's Name)	
	Address)	
<u> </u>	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT	M AIL
(E	Business Entity Name)	
	Document Number)	
Certified Copies	Certificates of Status	
Special Instructions to F	iling Officer:	

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Talinassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 773478 7213672
AUTHORIZATION: Symmetic man
COST LIMIT : \$ 150.00
ORDER DATE: May 26, 2023
ORDER TIME : 2:09 PM
ORDER NO. : 773478-010
CUSTOMER NO: 7213672
DOMESTIC AMENDMENT FILING
NAME: TIGER UP VENTURES, LLC
WAND. IIODK OF VENTORES, DDC
EFFECTIVE DATE:
XX ARTICLES OF CONVERSION AND ORGANIZATION
RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER'S INITIALS:

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Tiger Up Ventures, LLC		
	ulting Florida Limite	ited Company)
The enclosed Articles of Conversion, Articles Business Entity" into a "Florida Limited Li		tion, and fees are submitted to convert an "Othe y" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	
Frank Edwards		
(Contact Person)		_
Tiger Up Ventures, LLC		
(Firm/Company)		-
1501 South Flagler Dr, Unit 4D		
(Address)	***	***
West Palm Beach, FL 33401		
(City, State and Zip Code)	 	-
fedwards@aqueductcap.com		
E-mail Address: (to be used for future annual rep	port notifications)	_
For further information concerning this mat	tter, please call:	
Frank Edwards	_at ()	973-9920
(Name of Contact Person)	(Area Code)	973-9920 (Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the l		processed 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 I and Certified Copy	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	1 1 1 2	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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 Artic Tiger Up Ventures, LLC	es of Conversion is:
(Enter Name of Other Business Entity)	-'
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	on law or business trust, etc.)
First organized, formed or incorporated under the laws of	e name of the country)
April 10, 2017	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Art	icles of Organization:
Tiger Up Ventures, LLC	
(Enter Name of Florida Limited Liability Company)	•
1. If not effective on the date of filing, enter the effective date: N/A The effective date: Cannot be prior to date of receipt or filed date nor more than 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 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.	
 The "Converted or Other Business Entity" has agreed to pay any members having apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	sal rights the amount to

Signed this day of May	20_23		
Signature of Authorized Representative of Limi	ited Liability Company:		
Signature of Authorized Representative: Printed Name: Frank Edwards	Title: Managing Member		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature:	Title: Managing Member		
Signature:Printed Name:	Title:		
Signature:Printed Name:	Title:		
Signature: Printed Name:	Title:		
Signature:Printed Name:	Title:		
Signature: Printed Name:	Title:		
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 Liabili Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	i i	2023
All others: Signature of an authorized person.		.f., .g) -	HAT 26
Fees:			All
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		9: 02

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ARTICLES OF	ORGANIZATION FOR	R FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - N The name of the	lame: Limited Liability Compan	y is:
Tiger Up Venture	s, LLC	
(Must contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II The mailing add		ne principal office of the Limited Liability Company is:
Principal Office	e Address:	Mailing Address:
1501 South Flagl West Palm Beach		2820 Selwyn Avenue, Suite 550 Charlotte, NC 28209
	···	Attn: Christine Bowling
(The Limited Liability business entity with		ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
<i>9</i> '	Frank Edwards	
	7	Name
	1501 South Flagler Dr, U Florida street address	nit 4D (P.O. Box <u>NOT</u> acceptable)
	West Palm Beach	FL 33401
	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)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager MGR	Frank Edwards		
WOL.	1501 South Flagler Dr, Unit 4D		
	West Palm Beach, FL 33401		
			
<u> </u>			
			
(Use attachment if necessary)			
LE V: Other provisions, if any.			
required signature:			
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am awar		

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)

Typed or printed name of signee