LIHON MONTH

(Requestor's Name)
(Address)
` ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special institutions to thing emission

Office Use Only



200426815342



Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 04/12/2024	<u> </u>	**************************************	Th.Dea
		**WALK	<i>IN</i>
ENTITY NAME Impe	ro Capital Holdings, LLC	<u> </u>	
-			
DOCUMENT NUMBER	R		
	PLEASE FILE THE ATTACHED AND RETURN		
xxxxxxxxx	Plain Copy		
	Certified Copy		
-	Certificate of Status		
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY		
	Certified Copy of Arts & Amendments		
	Certificate of Good Standing		
	APOSTILLE' / NOTARIAL CERTIFICATION	2024 4PR	ار از نا
ANUNTON DE DESTIN	IATINAI	712	Francis E
COUNTRY OF DESTIN	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
NUMBER OF CERTIFIC	CATES REQUESTED		
TOTAL OWED \$150	ACCOUNT #: 1201600000	72	
	S 8 FM		
Planea call Time at	the above number for any issues or concerns. Thank you	en munk!	
TOUGH DAID THE RE	The above mander for any resided or conserting, I make you	so maore;	

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: IMPERO CAPITAL HOLDINGS,	LLC
	sulting Florida Limited Company)
	eles of Organization, and fees are submitted to convert an "Other iability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	ig this matter to:
TUCKER THONI	
(Contact Person)	
GrayRobinson, P.A.	
(Firm/Company)	
301 E. Pine Street, Suite 1400	
(Address)	
Orlando, Florida 32801	
(City, State and Zip Code)	 _
TUCKER.THONI@GRAY-ROBINSON.COM	
E-mail Address: (to be used for future annual rep	port notifications)
For further information concerning this mat	tter, please call:
Tucker Thoni	_at (
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amoundollars and drawn on a bank located in the I	ont: (All checks processed by this office must be payable in US United States)
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	and Certified Copy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations 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

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.

	MPERO CAPITAL HOLDINGS, 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.)
Fi	rst organized, formed or incorporated under the laws of
	•
on	March 23, 2022
	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
IN	IPERO CAPITAL HOLDINGS, LLC
_	(Enter Name of Florida Limited Liability Company)
	If not effective on the date of filing, enter the effective date:
	he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
th No	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
	The plan of conversion has been approved in accordance with all applicable statutes.
	The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 10TH day of APRIL	20 24 .		
Signature of Authorized Representative of Lim			
Signature of Authorized Representative: Printed Name: TUCKER THON!	Title: AUTHORIZED SIGNATORY		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)		
Signature:			
Printed Name: TUCKER THUN!	_ Title: <u>AUTHORIZEO SIGNAT</u>	ULY	
Signature: Printed Name:	Title:		
Signature:Printed Name:			
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 In-			
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.		202 5 5 5 17	
<u>Fees:</u>		2024 EPR 12 \$76 LL 25.7	(2) -
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	21): 0 (0/31/4)	
		בין דרו	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
IMPERO CAPITAL HOLDINGS, LLC		
(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
301 E. Pine Street, Suite 1400	301 E. Pine Street, Suite	1400
Orlando, Florida 32801	Orlando, Florida 32801	
ARTICLE III - Registered Agent, Registe The Limited Liability Company cannot serve as its own Re- business entity with an active Florida registration.) The name and the Florida street address of the	egistered Agent. You must designate ar	
Tucker Thoni , Esquire		
IND	ime	
301 E. Pine Street, Suite 1	400	
Florida street address (P	P.O. Box <u>NOT</u> acceptable)	
Orlando	FL 32801	
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capstatutes relating to the proper and comple accept the obligations of myposition as Registered Agent's S	l in this certificate, I hereby acoacity. I further agree to complete performance of my duties, a registered agent as provided f	ecept the appointment as ply with the provisions of all and I am familiar with and

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	EMPIRE INTERNATIONAL HOLDINGS, LLC
	301 E. Pine Street, Suite 1400
	Orlando, Florida 32801
	
	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE: /	-:
1/-	- //
/_/	
1/	7/
Signature of a member or a	an authorized representative of a member 5
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, I am aware the
	ment to the Department of State constitutes a third degree felo
as provided for in s.817.155, F.S.	

TUCKER THONI, AUTHORIZED SIGNATORY

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)