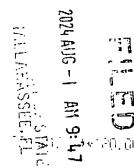
# C24000332860

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
·	(Document Number)
Certified Copies	Certificates of Status
	Fit 0"
Special Instructions to	Filing Officer:
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Office Use Only



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IALLAHASSEE, FLORIDA

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## CORPORATE ACCESS, \_

When you need ACCESS to the world

INC.

236 Fast 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### WALK IN

	P	ICK UP: BROOK 7/24	
XX	CERTIFIED COPY		
	РНОТОСОРУ		
	GS		
XX	FILING	CONVERSION	
	QUANTUM FINANO (CORPORATE NAME AND 1		ZDZ4 AUG -
_	(CORPORATE NAME AND I	DOCUMENT #)	14.6 14.1 15.1 15.1 15.1 15.1 15.1 15.1 15.1
_	(CORPORATE NAME AND I	OCUMENT #)	ς. <b>7</b>
_	(CORPORATE NAME AND I	OOCÜMENT #)	
_	(CORPORATE NAME AND I	OOCUMENT #)	
_	(CORPORATE NAME AND I	M M T IMIENTO #A	

#### **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.

1. The name of the "Other Business Entity" immediately prior to the QUANTUM FINANCIAL GROUP LLC	he filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, ge	. 20
First organized, formed or incorporated under the laws of	
(Enter state, o	or if a non-U.S. entity, the name of the country)
01/08/2002 on	
(date of organization, formation or incorporation)	19 ty
3. The name of the Florida Limited Liability Company as set forth	, , -
QUANTUM 1 FINANCIAL 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 d	•
the date this document is filed by the Florida Department of Sta	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory fill document's effective date on the Department of State's records.	ing requirements, this date will not be listed as the
5. The plan of conversion has been approved in accordance with all	l 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.

\$25.00

\$125.00

If Florida General Partnership or Limited Liability Partnership:

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signature of one General Partner.

Signatures of ALL General Partners.

Signature of an authorized person.

Articles of Conversion:

Fees for Florida Articles of Organization:

All others:

Fees:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	y is:	
QUANTUM 1 FINANCIAL GROUP LLC		
(Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited	Liability Company is:
		, ,
Principal Office Address:	Mailing Address:	
73 WEST MONROE ST 5TH FLOOR	73 WEST MONROE ST 5TH FLC	OOR
CHICAGO, IL 60603	CHICAGO, IL 60603	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	ered Office, & Registered Ager Registered Agent. You must designate an in	dividual or another
•		202
The name and the Florida street address of t	he registered agent are:	2024 AUG
Registered Agent Inc.		
Name		•
7901 4th St. N., Suite 300		MH 9: 47
Florida street address (1	P.O. Box NOT acceptable)	
St. Petersburg	FL 33702	1. 7
City	Zip	
	<del>-</del>	

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..



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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
AMBR	Clyde Foster 73 WEST MONROE ST 5TH FLOOR		
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	CHICAGO, IL 60603	_	
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(Use attachment if necessary)	The state of the s	Ĺ	
	MM 9: 47	,,	
CLE V. Od.	r, —d		
ICLE V: Other provisions, if any.			

Clyde Foster

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 s.817.155, F.S.

Clyde Foster

Typed or printed name of signee

Filing Fees