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XX	FILING	CONVERSION	
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COVER LETTER

TO:	New Filing S Division of C					
OF ID		e Investment LLC I				
SORI	ECT:		sulting Florida L	imited Cor	тралу)	
		s of Conversion, Artic a "Florida Limited Li				
Please	e return all corre	espondence concernin	g this matter (to:		21
James	s J. Murchie					7,74 PTO C
		(Contact Person)) ()
_		(Firm/Company)				:
5 Sab	re Lane	(111)				
Nania	s, FL 34102	(Address)				· ·
		City, State and Zip Code)				
jmurd	י≀ nie@eipinvestme	•				
E-r	nail Address: (to b	e used for future annual re	port notification	is)		
For fu	rther information	on concerning this ma	tter, please ca	ıll:		
Jeffre	y S. Hoffman		_at (²³⁹	\ ⁴³⁶⁻	1503	
	(Name of Conta	ct Person)	(Area Co	ode) (Day	ytime Telephone Number)
		or the following amou a bank located in the		-	sed by this office mu	st be payable in US
(\$25 fc & \$12:	i0.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Fi and Certified	•	\$185.00 Filing Fees Certified Copy, and Certificate of Status	•
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, St hassee, 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 Art	icles of Conversion is:
Triple Elle Investment LLC I (Enter Name of Other Business Entity)	- 203
2. The "Other Business Entity" is a	70241-0
	• •
First organized, formed or incorporated under the laws of(Enter state, or if a non-U.S. entity,	<u> </u>
(Enter state, or if a non-U.S. entity,	the name of the country)
December 19, 2011	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached A	rticles of Organization:
Triple Elle Investment LLC I	
(Enter Name of Florida Limited Liability Company)	_ ·
4. If not effective on the date of filing, enter the effective date:	<u>_</u> .
(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 document's effective date on the Department of State's records.	n 90 calendar days after
5. The plan of conversion has been approved in accordance with all applicable statute	es.
6. The "Converted or Other Business Entity" has agreed to pay any members having appropriate which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	raisal rights the amount to

Signed this 27th day of <u>December</u>	20 <u>24</u>
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Printed Name; James J. Murchie	TAMA
Printed Name: James J. Murchie	Tid., Manager
Fillited (value, James 5, Wording	Title: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	
Printed Name: James J. Mufchie	Title: Manager
	<u> </u>
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	OV. I
Printed Name:	Little:
Circustoma	
Signature:Printed Name:	Title
Frinted Name.	Title.
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
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:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

pany, "L.L.C.," or "LLC.") oal office of the Limited Liability ailing Address:	v Company is:
·	v Company is:
ailing Address:	
Sabre Lane	
ples, FL 34102	
<u> </u>	
x <u>NOT</u> acceptable)	
FL 34102	
Zip	
	ice, & Registered Agent's Sign Agent. You must designate an individual or sered agent are: x NOT acceptable) FL 34102

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title:	
"AMBR" = Authorized Member	
"MGR" = Manager	A control of the control
MGR	James J. Murchie
	5 Sabre Lane Naples, FL 34102
	Naples, FL 34 IU2
	
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
·	â.
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of	or an authorized representative of a member
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant.	ice with section 605,0203 (1) (b), Florida Statutes. I am aware
REQUIRED SIGNATURE: Signature of a member of This document-is executed in accordant any false information submitted in a document as provided for in s.817.155, F.S.	ice with section 605,0203 (1) (b), Florida Statutes. I am aware
REQUIRED SIGNATURE: Signature of a member of This document-is executed in accordant any false information submitted in a docast provided for in s.817.155, F.S. James J. Murchie, Manager	ice with section 605,0203 (1) (b), Florida Statutes, I am aware cument to the Department of State constitutes a third degree for
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant any false information submitted in a document in a docume	ice with section 605,0203 (1) (b), Florida Statutes. I am aware