## P19000051774

| (F                     | Requestor's Name)       |
|------------------------|-------------------------|
|                        | Address)                |
|                        |                         |
| (/                     | Address)                |
| (0                     | City/State/Zip/Phone #) |
| PICK-UP                | MAIL MAIL               |
|                        | Business Entity Name)   |
| ([                     | Document Number)        |
|                        | ,                       |
| Certified Copies       | Certificates of Status  |
| Special Instructions t | to Filing Officer:      |
|                        |                         |
|                        |                         |
|                        |                         |
|                        |                         |

Office Use Only

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ALLAHASSEE, FLORIDA

SECURE TARK OF STATE

## **COVER LETTER**

| TO:                                    | Charter Section<br>Division of Co   |   |  |  |
|--|---|---|--|--|
| SUBJE                                  | ECT:  | THE LE  | INDING CASA INC                                      |  |
|  | <u>-</u>  | Name of   | Resulting Florida Profit                             | Corporation  |
| The en-<br>Entity"                     | closed Certificat<br>into a "Florida !  | e of Conversion, Article<br>Profit Corporation" in ac | s of Incorporation, and f<br>cordance with s. 607.11 | ees are submitted to convert an "Other Business 15, F.S.                 |
| Please                                 | return all corresp  | pondence concerning this                              | s matter to:   |  |
|  |   | NAVEEN K BHAGWA                                       | ANI  |  |
|  |   | Contact Person  |  |  |
|  |   | THE LENDING CASA                                      | INC  |  |
|  |   | Firm/Company  |  |  |
|  |   | 777 BRICKELL AVENUE                                   | E SUITE 500  |  |
|  |   | Address   |  |  |
|  |   | MIAMI FLORIDA 33                                      | 131  |  |
|  |   | City, State and Zip Code                              |  |  |
| E                                      | -mail address: (t   | o be used for future annu                             | ual report notification)                             |  |
| For fur                                | ther information  | concerning this matter,                               | please call:   |  |
|  | NAVEEN K BHA  | AGWANI  | at ( )   | 34-7292  |
|  | Name of Co  | ontact Person   | _ \  | Daytime Telephone Number   |
| Enclose                                | ed is a check for   | the following amount:                                 |  |  |
| <b>□ \$</b> 105                        | 5.00 Filing Fees  | ■\$113.75 Filing Fees<br>and Certificate of<br>Status | □\$113.75 Filing Fees and Certified Copy             | ☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status         |
| New Fi<br>Divisio<br>Clifton<br>2661 E | ET ADDRESS:<br>lings Section<br>n of Corporation<br>Building<br>xecutive Center<br>ssee, FL 32301 |   | New F<br>Divisio<br>P. O. E                          | ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314 |

## Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

| 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Convers  | ion is: |
|--|---------|
| THE LENDING CASA LLC L19000012070  |         |
| Enter Name of Other Business Entity  |         |
| 2. The "Other Business Entity" is a Limited Liability Company  |         |
| (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)  |         |
| first organized, formed or incorporated under the laws of  |         |
| (Enter state, or if a non-U.S. entity, the name of the country)  |         |
| JANUARY 10, 2019   |         |
| <ol> <li>If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of vorganized, formed or incorporated:</li> <li>The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:</li> </ol>   |         |
| THE LENDING CASA INC   |         |
| Enter Name of Florida Profit Corporation   |         |
| 5. If not effective on the date of filing, enter the effective date:  (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat listed as the document's effective date on the Department of State's records. |         |

Page 1 of 2



| Signed this 8TH day of MAY   | , 20   |   |
|--|--|---|
| Required Signature for Florida Profit Corporation  |  |   |
| Signature of Chairman, Vice Chairman, Director, Off Incorporator:  Printed Name: NAVEEN K BHAGWANI Title: DIRE       |  | en selected, an                                 |
| Required Signature(s) on behalf of Other Business  | Entity: [See below for required signature(                   | s).]  |
| Signature: * Haveen Thagwa   | n  | _   |
| Printed Name: NAVEEN K BHAGWANI  | Title: MGRM  | _   |
| Signature:   |  | -   |
| Printed Name:  | Title:   |   |
| Signature:   |  | _   |
| Printed Name:  | Title:   |   |
| Signature:   |  |   |
| Printed Name:  | Title:   |   |
| Signature:   |  |   |
| Printed Name:  | Title:   |   |
| Signature:   | 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                       | ,   |
| Printed Name:  | Title:   |   |
| If Florida General Partnership or Limited Liability<br>Signature of one General Partner.                             | y Partnership:   | Fig u   |
| If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.                       | <u> Limited Partnership:</u>                                 | VISION OF C<br>9 JUN 18<br>1 JUN 18<br>1 JUN 18 |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representative.                            |  | HR 81<br>SEE, FL                                |
| All others: Signature of an authorized person.   |  | II: 17  |
| Fees:  Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status: | \$35.00<br>\$70.00<br>\$8.75 (Optional)<br>\$8.75 (Optional) |   |

## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| RTICLE II PRINCIPAL OFFICE  |  |                 |  |
|---|--|-----------------|--|
| e principal place of business/mailing address is:   |  |                 |  |
| Principal street address 777 BRICKELL AVENUE  |  | Mailing address | , if different is:                           |
| SUITE 500   | <del></del>                                      |                 |  |
| MIAMI, FL 33131   |  |                 | <del></del>                                  |
| TICLE III PURPOSE   | <del>-</del>                                     |                 |  |
| e purpose for which the corporation is organized is:  |  |                 |  |
| BUSINESS RESTRUCTURE, CONVERTING LLC  | TO INC   |                 |  |
|   |  | -               |  |
|   |  |                 |  |
|   |  |                 |  |
|   |  | ·- ·- ·         | <u>.                                    </u> |
|   |  |                 |  |
|   |  |                 |  |
|   |  |                 | <u></u>                                      |
|   |  |                 |  |
| TICLE IV SHARES 250   |  |                 |  |
| number of shares of stock is:   |  |                 |  |
| number of shares of stock is:   | ECTORS   |                 |  |
| number of shares of stock is:   | PECTORS  Name and Title                          | ::              |  |
| TICLE V INITIAL OFFICERS AND/OR DIR   | Name and Title                                   |                 | 19<br>IALL                                   |
| me and Title:  777 BRICKELL AVENUE, SUITE 500  MIAMI, FL 33131  | Name and Title                                   |                 | AHAS   |
| me and Title:  777 BRICKELL AVENUE, SUITE 500  MIAMI, FL 33131  | Name and Title                                   |                 | AHASSEE                                      |
| me and Title:  MIAMI, FL 33131  me and Title:  me and Title:  | Name and Title Address: Name and Title           | :               | JUN 18 A                                     |
| me and Title:  MIAMI, FL 33131  me and Title:  me and Title:  MIAMI, FL 33131  me and Title:  me and Title: | Name and Title Address: Name and Title           |                 | JUN 18 AM II: 17 AHASSEE, FLORIDA            |
| me and Title:  MIAMI, FL 33131  me and Title:  me and Title:  | Name and Title Address:  Name and Title Address: |                 | JUN 18 AM II: 17 AHASSEE, FLORIDA            |

|  | e and Florida street address (P.O. Box NOT acceptable  | e) of the registered agent is                     |         |
|--|--|---|---------|
| Name:                                  | NAVEEN K BHAGWANI,   | ,   |         |
| Address:                               | 777 BRICKEL AVENUE SUITE 500   |   |         |
|  | MIAMI, FL 33131  |   |         |
| ARTICL                                 |  |   |         |
| The name                               | and address of the Incorporator is:  |   |         |
| Name:                                  | AVEEN K BHAGWANI,  |   |         |
| Address:                               | 777 BRICKEL AVENUE SUITE 500   |   |         |
|  | MIAMI, FL 33131  |   |         |
|  |  |   |         |
| ********  Having be this certifi       | ten named as registered agent to accept service of procestate, I am familiar with and accept the appointment as the service of procestate, I am familiar with and accept the appointment as the service of procestate, I am familiar with and accept the appointment as the service of procestate and accept the appointment as the service of the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment accept the appointment accept the appointment accept the appointment accept the a | **************************************            | ated in |
| ********  Having be this certification | **************************************   | egistered agent and agree to act in this capacity | ated in |
| I submit th                            | ten named as registered agent to accept service of procestate, I am familiar with and accept the appointment as the service of procestate, I am familiar with and accept the appointment as the service of procestate, I am familiar with and accept the appointment as the service of procestate and accept the appointment as the service of the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment as the service of process and accept the appointment accept the appointment accept the appointment accept the appointment accept the a | 5/8/2019  Date                                    |         |
| I submit th                            | ren named as registered agent to accept service of processate, I am familiar with and accept the appointment as Required Signature/Registered Agent  | 5/8/2019  Date                                    |         |

19 JUN 18 AM II: 17