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(Requestor's Name)

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☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

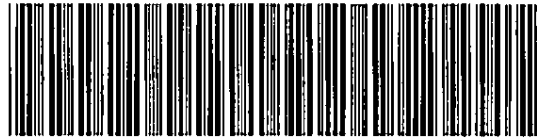
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2020 JUN -4 AM 1:19
SOUTHERN DISTRICT
FALL MASSACHUSETTS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 28, 2020

BROCK EASTON
47 S PENNSYLVANIA ST, STE 700
INDIANAPOLIS, IN 46204

SUBJECT: SAW CAPITAL CORPORATION, INC.
Ref. Number: W20000052180

2020 JUN -4 PM 2:35

We have received your document for SAW CAPITAL CORPORATION, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page
Regulatory Specialist II

Letter Number: 420A00010627

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SAW Capital Corporation, Inc.

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Brock Easton

Contact Person

Alerding Castor, LLP

Firm/Company

47 S. Pennsylvania St., Suite 700

Address

Indianapolis, IN 46204

City, State and Zip Code

lexendine@sawcapital.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie Exendine at (317) 432-3500

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$105.00 Filing Fees ☐ \$113.75 Filing Fees ☐ \$113.75 Filing Fees ☒ \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status 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
Converting Eligible Entity
Into
Florida Profit Corporation

The Articles of Conversion **and attached Articles of Incorporation** are submitted to convert the following **eligible business entity into a Florida Profit Corporation** in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

SAW Capital Corporation, Inc.

Enter Name of the Converting Entity

2. The converting entity is a **Corporation**

(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 **the state of Indiana**

(Enter state, or if a non-U.S. entity, the name of the country)

on **May 31, 1974**

Enter date "Converting Entity" was first organized, formed or incorporated.

3. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

SAW Capital Partners Inc.

Enter Name of Florida Profit Corporation

4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.

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 by the Florida Department of State.)

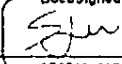
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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DEPT. OF STATE
TALLAHASSEE, FL

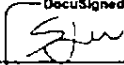
Signed this 3rd day of June, 2020.

Required Signature for Florida Profit Corporation:

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

DocuSigned by:

BE7F8518BF1F476
Printed Name: Scott J. Weaver Title: President

Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]

Signature: 
BE7F8518BF1F476
Printed Name: Scott J. Weaver Title: President

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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2020 JUN -4 AM 1:19
CLERK OF DISTRICT COURT
JULIA HASSLER

**ARTICLES OF INCORPORATION
FOR RESULTING FLORIDA PROFIT CORPORATION**
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME SAW Capital Partners Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

107 Aquarina Blvd.

Melbourne Beach, FL 32951

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to carry out any lawful act concerning any or all lawful business for which
corporations may be organized according to the laws of the State of Florida,
including all powers and purposes now and hereafter permitted by law
to a corporation, and to carry out any other activity not precluded by the
Florida Business Corporation Act.

ARTICLE IV SHARES 11,000
The number of shares of stock is: _____

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: Scott J. Weaver, President

Name and Title: _____

Address: 107 Aquarina Blvd.
Melbourne Beach, FL 32951

Address: _____

Name and Title: Aaron Weaver, Secretary

Name and Title: _____

Address: 4310 Stout Field North Dr.
Indianapolis, IN 46241

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

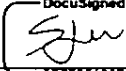
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CLERK OF CIRCUIT COURT
JULIA A. ASKE
FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Scott J. Weaver
Address: 107 Aquarina Blvd.
Melbourne Beach, FL 32951

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

DocuSigned by:

Required Signature/Registered Agent

May 15, 2020
Date

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TALLAHASSEE, FL