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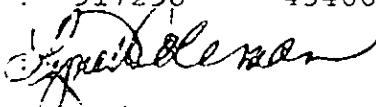
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2023 AUG -4 AM 11:19

STATE OF FLORIDA
OFFICE OF THE CLERK

2023 AUG -4 PM 10:51

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 917296 4346691
AUTHORIZATION 
COST LIMIT : \$128.75

ORDER DATE : August 2, 2023
ORDER TIME : 12:51 PM
ORDER NO. : 917296-005
CUSTOMER NO: 4346691

DOMESTIC AMENDMENT FILING

NAME: LITCHFIELD FINANCE LTD.

EFFECTIVE DATE:

XX ARTICLES OF DOMESTICATION AND INCORPORATION
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER'S INITIALS: _____

COVER LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: Litchfield Finance Inc.

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	<u>\$ 78.75</u>
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: Yehuda Frid

Name (printed or typed)

1441 Brickell Ave, Suite 1400

Address

Miami, FL 33131

City, State & Zip

305-364-5646

Daytime Telephone Number

corporatefilings@gplawintl.com

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

Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, Sergio M. Grosskopf Director
(Name) (Title)

of Litchfield Finance Ltd., a foreign corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of Domestication.

1. Then name of the domesticating corporation is Litchfield Finance Ltd.
(Foreign Corporation)

2. The jurisdiction and date of its formation is British Virgin Islands, June 9, 1999

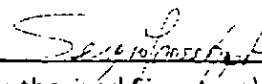
3. The name of the domesticated corporation is Litchfield Finance Inc.

4. The jurisdiction of formation of the domesticated corporation is **Florida**

5. The domestication corporation is a foreign corporation and the domestication was approved in accordance with its organic law.

6. Attached are Florida Articles of Incorporation to complete the domestication requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.


(Authorized Signature)

2023.11.17 P114:51

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Litchfield Finance Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address
1441 Brickell Ave, Suite 1400

Miami, FL 33131

Mailing Address
1441 Brickell Ave, Suite 1400

Miami, FL 33131

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

The Corporation may transact any and all lawful business for which corporations may be or
the Florida Business Corporation Act

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1,000 shares of \$1.00 par value with one vote per share

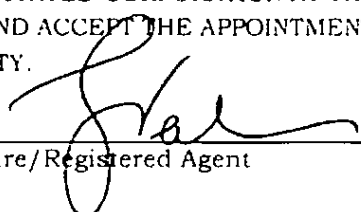
ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX **NOT** ACCEPTABLE) OF THE REGISTERED AGENT IS:

George D. Perlman P.A.

1441 Brickell Ave, Suite 1400, Miami, FL 331

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.



Signature/Registered Agent

August 2, 2023
Date

ARTICLE V DIRECTORS AND/OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Name & Title: Manuel Grosskopf, Director and President

Address: 18851 NE 29th Ave,

Suite 1011-B

Aventura, FL 33180

Name & Title: Walter Fischer, Director, Secretary and Treasurer

Address: 18851 NE 29th Ave,

Suite 1011-B

Aventura, FL 33180

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

I submit this document and affirm that the facts stated herein are true. I am aware that 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.

Signature/Authorized Person

August 2, 2023

Date _____

2023 Ac. - 1 P: 4:51