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| TO: New Filing S Division of O | | | |
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| | R SETTLEMENT SERVICES, | INC | |
| SUBJECT: Treame | | Resulting Florida Profit | Corporation |
| The enclosed Article entity into a "Florida | s of Conversion, Articles o Profit Corporation" in acc | of Incorporation, and fees ordance with ss. 607.119 | are submitted to convert the following eligible 33 & 607.0202, F.S. |
| Please return all corr | espondence concerning thi | s matter to: | |
| ANTHONY MORALES | 8 | | |
| | Contact Person | | |
| MYUSACORPORATIO | | | |
| | Firm/Company | | |
| 1 RADISSON PLAZA, | | | |
| | Address | | |
| NEW ROCHELLE, NY | | | |
| | City, State and Zip Cod | e e | |
| INFO@MYUSACORP E-mail address | ORATION.COM (to be used for future ann | ual report notification) | |
| | on concerning this matter. | • | |
| ANTHONY MORALES | 3 | _at (<u>877</u>) 330- | -2677 |
| Name of | Contact Person | | Daytime Telephone Number |
| Enclosed is a check | for the following amount: | | |
| □ \$105.00 Filing Fe | res □\$113.75 Filing Fees and Certificate of Status | ■\$113.75 Filing Fees and Certified Copy | ☐\$122.50 Filing Fees. Certified Copy, and Certificate of Status |
| Mailing Ad | ldress: | Street | Address: |

New Filing Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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: |
|---|
| PREMIER SETTLEMENT SERVICES, INC. |
| Enter Name of the Converting Entity |
| 2. The converting entity is a PROFIT 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 ofWI |
| (Enter state, or if a non-U.S. entity, the name of the country) |
| on 07/06/1993 |
| Enter date "Converting Entity" was first organized, formed or incorporated. |
| 3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> : PREMIER SETTLEMENT SERVICES, 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. |

| Signed this 12TH day of APRIL | , 20 <u>24</u> |
|--|--|
| Required Signature for Florida Profit Corporation | <u>ı.</u> |
| Signature of Director, Officer, or, if Directors or Office | ters have not been selected, an Incorporator: |
| - Muse fisheren | |
| Printed Name: CHARLES J. DERENNE Title: PRES | IDENT |
| companies: [See below for required signature(s).] | rida partnerships, limited partnerships, and limited liability |
| Signature: <u>Marks Jakkasur</u> | |
| Printed Name: CHARLES J. DERENNE | 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 Liabilit Signature of one General Partner. | y Partnership: |
| If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners | y Limited Partnership: |
| | |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representative. | • |
| All others: Signature of an authorized person. | |
| Fees: | #35.00 |
| Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status: | \$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional) |

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

ARTICLE I **NAME** The name of the corporation shall be: PREMIER SETTLEMENT SERVICES, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: 4620 TURNBERRY LAKE DRIVE #304 ESTERO, FL 33928 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Structured Settlement Broker ARTICLE IV SHARES The number of shares of stock is: 1,000 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARLES J. DERENNE, TREASURER Name and Title: CHARLES J. DERENNE, PRESIDENT Address: 1756 WHITE PINES TRL 1756 WHITE PINES TRL Address: RICHFIELD, WI, 53076 RICHFIELD, WI, 53076 Name and Title: CHARLES J. DERENNE, \$ Name and Title: CHARLES J. DERENNE, DIRECTOR 1756 WHITE PINES TRL Address: Address: RICHFIELD, WI, 53076 RICHFIELD, WI, 53076 Name and Title: ANNE M. DERENNE, SECRETARY Name and Title: 1756 WHITE PINES TRL Address: Address:

RICHFIELD. WI, 53076

| ARTICL. The name | E VI REGISTERED AGENT and Florida street address (P.O. Box NOT accepta | ole) of the registered agent is: | |
|------------------|---|---|-----------|
| Name: | CHARLES J. DERENNE | | |
| Address: | 4620 TURNBERRY LAKE DRIVE #304 | | |
| | ESTERO, FL 33928 | | |
| | | | |
| ****** | ************************** | ************** | |
| | een named as registered agent to accept service of pr icate, I am familiar with and accept the appointment | ocess for the above stated corporation at the place desi as registered agent and agree to act in this capacity | gnated in |
| (M) | ich 1 Maume | 04/12/2024 | |
| | Required Signature/Registered Agent | Date | |