See below for fees STATE OF MAINE STATEMENT OF CONVERSION Deputy Secretary of State Pursuant to 31 MRSA §1647 the undersigned organization executes and delivers the following statement that it has A True Copy When Attested By Signature converted into another organization. Deputy Secretary of State FIRST: **Converting Organization** The name of the converting organization: The form of the converting organization: The jurisdiction of the converting organization prior to filing this certificate: The date of its organization: SECOND: Converted (Resulting) Organization The name of the converted (resulting) organization: The form of the converted (resulting) organization: The jurisdiction of the converted (resulting) organization's governing statute: The date of its organization: The address of its principal office is: THIRD: The date the conversion is effective under the governing statute of the converted organization: FOURTH: The conversion was approved as required by 31 MRSA Chapter 21 and the limited liability company agreement. FIFTH: The conversion was approved as required by the governing statute of the converted organization. SIXTH: (Foreign Converted Organization Only) The foreign converted organization acknowledges it may be served with process in this State by certified mail and the address of its principal office for the purposes of §1648.3 is: (Principal office address)

(Principal office address)

SEVENTH: Res	ult of Conversion (Select One)				
	*The organizing document for the copart hereof; or	onverted (resulting) organ	ization is attached as Exhibit_	, and made a	
	The converted (resulting) is an organ	ed (resulting) is an organization not filing with the Maine Secretary of State's office.			
	Must Be Comp	oleted by the Converti	ng Organization		
(name and form of converting organization)			(dated)		
	(authorized signature)		(type or print	name and capacity)	
(authorized signature)			(type or print	(type or print name and capacity)	
*Filing Fee and	Exhibit Requirements: Select the re	equired exhibit below by	clicking the converted (resul	ting) organization type:	
	Domestic Business Corporation Domestic Nonprofit Corporation Domestic Limited Partnership Domestic Limited Liability Compa Domestic Limited Liability Partne Domestic Partnership	Foreign Nonp Foreign Limit nny Foreign Limit	ess Corporation rofit Corporation ed Partnership ted Liability Company ted Liability Partnership tership	Filing fee is \$145 Filing fee is \$40 Filing fee is \$175 Filing fee is \$175 Filing fee is \$175 Filing fee is \$175	
	MRSA §§1647 and 1676.1, this state is party to this conversion.	ement of conversion mus	st be signed by a person au	thorized by each constituent	
The execution of	this certificate constitutes an oath or a	ffirmation, under the pena	ulties of false swearing under1	7-A MRSA §453.	
Please remit your	payment made payable to the Maine S	Secretary of State.			
Submit completed	· · · · · · · · · · · · · · · · · · ·	orations, UCC and Com Station	nmissions		

Telephone Inquiries: (207) 624-7752

 $Email\,Inquiries:\,CEC. Corporations@Maine.gov$

Customer Contact Cover Letter

Name of entity(s) on the submitted filings:				
Optional special handling request(s): (check only	if applicable)			
Hold attested copy for pick up (will be	required to pick up at our office in Augusta, Maine)			
24-hour expedited filing (next business	day) service: \$50 additional filing fee per entity			
Immediate expedited filing (same busin	ness day): \$100 additional filing fee per entity			
NOTE: Only one expedite fee is required if filing m	ultiple documents for the same entity/charter number at the same time.			
Payment can be made by check or money order obtain a credit card voucher at https://www.maine.g	(payable to Maine Secretary of State) or by credit card. You may gov/sos/cec/forms/credit.pdf.			
Total fee(s)	enclosed: \$			
(Name of contact person)	(Daytime telephone number)			
(Contact email address for <i>this</i> filing)	(Email address to use for annual report reminders)			
Name and address of person to return the attested	copy of the completed filing:			
(Name	e of attested copy recipient)			
	(Firm or Company)			
	(Mailing Address)			
	(City, State & Zip)			

NOTE: Failure to provide a contact name and telephone number or email address will result in any erroneous filing(s) being returned to the filer by the Secretary of State's office.

For questions regarding the above filing(s), please call or email our office at (207) 624-7752 or cec.corporations@maine.gov

Submit filings to:

Mailing Address if using US Postal Service Department of the Secretary of State Corporations, UCC and Commissions 101 State House Station Augusta, ME 04333-0101 Mailing Address if using FedEx/UPS
Department of the Secretary of State
Corporations, UCC and Commissions
6 E. Chestnut Street, 5th Floor
Augusta, ME 04330