RI SOS Filing Number: 202444749970 Date: 1/25/2024 2:33:00 PM

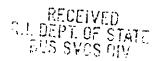


State of Rhode Island Department of State - Business Services Division

Application for Certificate of Conversion

DOMESTIC Business Corporation, Non-Profit Corporation, Limited Partnership, Limited Liability Partnership or Limited Liability Company

→ No Filing Fee



2024 JAN 25 P 2: 33

1

1. Entity ID Number:	The full name of the converting entity is: Life of Reverie LLC			
3. It is formed under the jurisdiction of:		4. The date of formation is:		
Texas		07/12/2021		
5. The jurisdiction to which the entity is converting:				
RHODE ISLAND				
6. The structure of the converting entity is: CHECK ONE BOX ONLY				
Business Corporation		Non-Profit Corporation		
✓ Limited Liability Company		Other Entity		
Partnership (General, Limited, or Limited Liability Partnership)				
7. The structure of the entity following conversion will be: CHECK ONE BOX ONLY				
Business Corporation		Limited Partnership / Limited Liability Limited Partnership		
Non-Profit Corporation		Limited Liability Partnership		
Limited Liability Company	,			
8. The name of the entity following the conversion is:				
Life of Reverie LLC				
		ate of formation have been approved by the converting entity in 2.1-1143, 7-13,1-1143 and 7-16-5,1.		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

2:33

JAN 25 2024
BYM

10. This certificate of conversion is filed as an accompanying	certificate to: CHECK ONE BOX ONLY	
Business Corporation Articles of Incorporation		
Non-Profit Corporation Articles of Incorporation		
Limited Liability Company Articles of Organization		
Statement of Limited Liability Partnership		
Certificate of Limited Partnership		
Statement of Limited Liability Limited Partnership		
11. Date when this Certificate of Conversion will be effective:	CHECK ONE BOX ONLY	
☑ Date received (Upon filing)		
Later effective date		
Under penalty of perjury, we declare and affirm that we have accompanying attachments, and that all statements contained		ıy
Type or Print Name of Converting Entity		
Life of Reverie		
Type or Print Name of Person Signing	Title of Person Signing	
Marcel Leconte	Managing Member	
Signature	Date	
	01/25/24	
Type or Print Name of Person Signing	Title of Person of Signing	
Signature	Date	

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

January 25, 2024 02:33 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

