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| Conveying Party | Mark if additional names of conveying parties attached Execution Dat Month Day Y | | |
| Name Thrive Partners | 11 06 199 | | |
| Formerly | | | |
| | | | |
| Individual X General Partnership | Limited Partnership Corporation Associat | | |
| Other | | | |
| X Citizenship/State of Incorporation/Organi | ization Delaware | | |
| Receiving Party | Mark if additional names of receiving parties attached | | |
| Name Thrive Partners, L.L | L.C. | | |
| DBA/AKA/TA | | | |
| Composed of | | | |
| 221 Main Street | | | |
| Address (line 1) | | | |
| Address (line 2) Suite 480 | | | |
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| | not domiciled in the United States, a appointment of a domestic | | |
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| Address (line 1) | Debevoise & Plimpton | | | |
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<u>December 10, 1998</u>

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Stale of Delaware

Office of the Secretary of State PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND
CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A DELAWARE
GENERAL PARTNERSHIP TO A DELAWARE LIMITED LIABILITY COMPANY OF
"TERIVE PARTNERS", CHANGING ITS NAME FROM "THRIVE PARTNERS" TO
"THRIVE PARTNERS, L.L.C." FILED IN THIS OFFICE ON THE SIXTH DAY
OF NOVEMBER, A.D. 1998, AT 1 O'CLOCK P.M.

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Date of Deposit December 10, 1998

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Elisa Raley

(Signature of person mailing paper or fee)

AUTHENTICATION:

D.C. 20231.

9393060

DATE:

Edward J. Freel, Secretary of State

11-06-98

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STATE OF DELIGIBE SECRETARY OF STATE DIVISION OF CORRESATIONS FILED 01:00 PM 11/04/1998 981426189 - 2963813

THRIVE PARTNERS

CERTIFICATE OF CONVERSION TO A LIMITED LIABILITY COMPANY

The undersigned, in order to convey from a general partnership formed under the Delevere Uniform Partnership Act into a limited liability company formed under the Delaware Limited Liability Company Act, as attended, pursuant to Section 18-214 of the Delaware Limited Liability Company Act, known certifies as follows:

Section I. <u>Date and Jurisdiction of Creation</u>. Thrive Partners is a general partnership formed under the Delaware Uniform Partnership Act on Jenuary 1, 1996.

Section II. Name of Partnership. The same of the permership immediately prior to the filing of this certificate is Thrive Partners.

Section III. Name of Limited Liebility Company. The name of the limited liability company as set forth in its Certificate of Formation is Thrive Partners, L.L.C.

IN WITNESS WHEREOF, the undersigned cartifies to the best of its knowledge and belief that the facts stated herein are true as of Necrobs 6, 1998.

THRIVE PARTNERS

Data Orum

President

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I, ROWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELLERARE DO EXERCY CERTIFY THAT-THE TATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "THRIVE PARTNERS, L.L.C." FILED IN THIS OFFICE ON THE THE SIXTE DAY OF NOVEMBER, A.D. 1998, AT 1 O'CLOCK P.M.

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... Elisa Raley
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THRIVE PAR NERS, LLC

CERTIFICATE OF FORMATION

The undersigned, in order to form a limited liability company under the Delaware Limited Liability Company Act, as amendad, Leastly cartifies as follows:

Section I. Name. The same of the limited liability company is Thrive Parmers, L.L.C. (the "Company").

Section IL Registered Office and Levistered Agent. The address of the Company's registered office in the State of Laboure is 1209 Orange Street, Wilmington, New Castle County, DE 19801. The name of the Company's registered agent at such office is The Corporation Trust Company.

Limitation of Liability of Mambers and Managers. The debts, obligations and liabilities of the Company, whicher adding in test, contract or otherwise, shall be solely the debts, obligations and Illinian of the Company, and no Mamber or Manager of the Company shall be obligated parasilly for any such debe, obligation or liability of the Company solely by reason of Ling a Member of acting as a Manager of the Company. A Manager of the Company, it to the mercinana extent nermined by the laws of Delawers, have no personal list. Ty to the Company or its Members for monetary demages for breach of fiduciary day as a Masseger, provided that this provision shall not eliminate or reduce the liability of a ligander is may ease where such elimination or reduction is not permitted by L.w.

IN WITNESS WHEREOF, the unitarized certifies to the best of his knowledge and belief that the facts stated he din are true as of Movember

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(Signature of person mailing paper or fee)

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