*L09000091358

(Requestor's Name)			
(Add	dress)		
(Add	dress)		
(City	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to F	Filing Officer:		

Office Use Only



600269842646

03/04/15--01005--020

**55.00

EFFECTIVE DATE



15 HAR -4 PH 1: 35

K.SALY EXAMINER MAR - 5 2015

RSJ VENTURES, LLC		L09000091358	
<u> </u>			
			
		•	
Thank you!			
,			
() Profit	() Amendment	•	() Merger
() Nonprofit	() Amendment		() Micigor
() Foreign	() Dissolution/Withdra	iwal	() Mark
	() Reinstatement		
() Limited Partnership	() Annual Report		(X) Other
()LLC	() Name Registration		Conversion
	() Fictitious Name		() UCC
(X) Certified Copy	() Photocopies		() CUS
Conversion			
() Call When Ready	() Call If Problem		
(x) Walk in	() Will Wait		(x) Pick Up
() Mail Out			
Name	3/4/2015		Order#:
Availability			9464148
Document	ST		
Examiner			Ref#:
Updater			
Verifier			
W.P. Verifier			Amount: \$

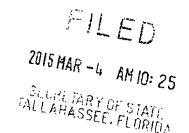
COVER LETTER

TO:	Registration S Division of C			
STIRTE	ECT: RSJ Ventu	res, LLC		
50501	JUX1	Name of Florida	Limited Liability Comp	any
Limited		of Conversion and for any" into an "Othe		
Please	return all corre	spondence concernin	g this matter to:	
Jason La	aValla			
		Contact Person		
The Gia	nnuzzi Group LI	P		
•		Firm/Company		
411 W.	14th St., 4th Fl.			
New Yo	ork, NY 10014	Address		
	С	ity, State and Zip Code		
iason@	gglaw.us			
-		oe used for future annual i	eport notification)	
For fur	ther information	on concerning this ma	tter, please call:	
Jason L	aValla		at (212) 50	04-2060
Na	me of Contact Pe	rson	Area Code and I	Daytime Telephone Number
Enclos	ed is a check f	or the following amou	int:	
□ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee and Certificate of Status	\$\$55.00 Filing Fee and Certified Copy	\$60,00 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 CR2E106 (07/14)		MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		



Articles of Conversion For Florida Limited Liability Company Into

"Converted or Other Business Entity"



The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

Business Entity" is:
RSJ Ventures, LLC
Enter Name of Florida Limited Liability Company
2. The name of the "Converted or Other Business Entity" is:
RSJ Ventures, LLC
Enter Name of "Converted or Other Business Entity"
3. The "Converted or Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
organized, formed or incorporated under the laws of
on March 4, 2015
(Date of organization, formation or incorporation)
and the formation document is attached (if applicable).
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.
5. This conversion shall be effective in Florida on: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date of the conversion under the laws governing the "Other Business Entity.")

Page 1 of 2

6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity": a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to

Depar	~	and mailing address of an office the Florida and process served on the department pursuant t	to
Street Addres	3585 LAUREL	GREENS LANE N. #203	30 18/1
	NAPLES, FL 34	4119	
Mailing Address:	PO BOX 11087	71	TO THE THE PERSON WAS A STATE OF THE PERSON
J	NAPLES, FL 34	4108	- 1997.3
appraisal and 605.1	rights the amount to wh 061-605.1072, F.S.	ss Entity" has agreed to pay any members having nich such members are entitled under ss. 605.1006	
Signed this _	thday of	f March , 20 15	
Signature:	94	ned by a Member or Authorized Representative	
Printed Name	Jason LaValla	Title: Authorized Representative	
	Fee: led Copy: leate of Status:	\$25.00 \$30.00 (Optional) \$5.00 (Optional)	

Page 2 of 2