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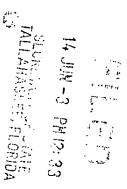
(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
Opecial matriculars to	r illing Officer,	
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Office Use Only



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COVER LETTER

TO:	Registration S Division of C					
SUBJ	JECT: RLF Ba	aldwin Operations II,	LLC			
	·—·	(Name	of Resulting Florida	Limite	d Company)	
					d fees are submitted to cocordance with s. 605.10	
Please	e return all corre	espondence concerning	g this matter to:			
Broo	ks DeLaney					
		(Contact Person)		•		
RLF	Baldwin Oper	ations II, LLC				
		(Firm/Company)		•		
PO E	3ox 1040					
		(Address)		•		
Mag	nolia Springs,	AL 36555				
	((City, State and Zip Code)		•		
broo	ks@headwate	erholdings.com				
E-r	nail Address: (to b	e used for future annual re	port notifications)	•		
For fi	ırther informati	on concerning this ma	tter, please call:			
Stev	e Chandler		_at (251	989	-2013	
	(Name of Conta	ict Person)	(Area Code)	(Day	time Telephone Number)	•
Enclo	sed is a check f	for the following amou	int:			
(\$25 fc & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STRI	EET ADDRES	S:	MAIL	ING A	ADDRESS:	
	tration Section		Registr			
	ion of Corporat	ions			Corporations	
Clifto	n Building		P. O. B	OX 03.	21	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Bus RLF Baldwin Operations II !	siness Entity" immediately prior to the filing of the Articl	es of Conv	versio	n is:
	(Enter Name of Other Business Entity)			
2. The "Other Business Entity"	is a limited liability company			
2. The Other Business Estate,	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	ſ		
First organized, formed or inco	orporated under the laws of Colorado			
06/23/2006	(Enter state, or if a non-U.S. entity, the	name of the	count	iry)
on (date of organization, formation	or incorporation)			
RLF Baldwin Operations II L		·	даны	Lativii.
(Enter N	Name of Florida Limited Liability Company)			
(The effective date: 1) canno date this document is filed by	of filing, enter the effective date: t be prior to date of receipt or filed date nor more that the Florida Department of State; AND 2) must be the ticles of Organization, if an effective date is listed ther	e same as		
5. The plan of conversion has b	peen approved in accordance with ss. 605.1041-605.1046.	TALL SE	14	
	Page 1 of 2	A HAYSON	JUN -3	के के कि के कि

Signed this 30th day of May	20.14	
Signature of Authorized Representative of Limi		
Signature of Authorized Representative: Printed Name: Brooks C. DeLaney	y and the same of	
Printed Name: Brooks C. DeLanev	Title: Authorized Representative	
		•
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]	
Signature:		
Printed Name: Brooks C. DeLarley	Title: Authorized Representative	-
Timod Tumo. Diodito C. Do Latio		•
Signature:		_
Printed Name:	Title:	-
Signature		
Signature:Printed Name:	Title:	-
Signature:Printed Name:		-
Printed Name:	Title:	_
Signature:		
Printed Name:	Title:	<u>-</u>
Signature:Printed Name:	Tida	-
Printed Name:	riue.	-
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Director, or		
If Directors or Officers have not been selected, an Inc	corporator must sign.	
If Florida General Partnership or Limited Liabilit	ty Partnership:	
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ty Limited Partnership:	
Signatures of ALL Ocherar Farthers.		ė"
All others:		A A
Signature of an authorized person.		
г		
Fees:		र्रेड के ब्रह्म
Articles of Conversion:	\$25.00	TO project
Fees for Florida Articles of Organization:	\$125.00	
Certified Copy:	\$30.00 (Optional)	100 N
Certificate of Status:	\$5.00 (Optional)	8m &

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
RLF Baldwin Operations II, LLC	
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12940 Underwood Road	PO Box 1040
Summerdale, AL 36580	Magnolia Springs, AL 36555
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an individual or another
Corporation Service Com	pany
Name	
1201 Hays Street	
Florida street address (P.O.	Box NOT acceptable)
<u>Tallahassee</u>	FL 32301-2525
City	Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S
By:	Lindsey Buis, Asst. Secretary
Registered Agent's Signa	ature (REQUIRED)
(CONTINU	JED)
Page 1 of	2 PH 7

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Edwards Manager at L
MGR	Edgewater Management, Inc
	12940 Underwood Road Summerdale, AL 36580
	Summerdale, AL 30360
	·
(Use attachment if necessary) RTICLE V: Effective date, if other than an effective date is listed, the date me	the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days p
RTICLE V: Effective date, if other than an effective date is listed, the date muor 90 days after the date of filing.) RTICLE VI: Other provisions, if any.	ust be specific and cannot be more than five business days p
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RTICLE V: Effective date, if other than an effective date is listed, the date me or 90 days after the date of filing.) RTICLE VI: Other provisions, if any. one REQUIRED SIGNATURE: Signature of a mem	ber or an authorized representative of a member.
RTICLE V: Effective date, if other than an effective date is listed, the date mor 90 days after the date of filing.) RTICLE VI: Other provisions, if any. one REQUIRED SIGNATURE: Signature of a mem (In accordance with section 605.020)	aber or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this document
RTICLE V: Effective date, if other than an effective date is listed, the date me or 90 days after the date of filing.) RTICLE VI: Other provisions, if any. one REQUIRED SIGNATURE: Signature of a mem (In accordance with section 605.020 constitutes an affirmation under the provisions of the section of th	aber or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this document benalties of perjury that the facts stated herein are true,
RTICLE V: Effective date, if other than an effective date is listed, the date me or 90 days after the date of filing.) RTICLE VI: Other provisions, if any. one REQUIRED SIGNATURE: Signature of a mem (In accordance with section 605.020 constitutes an affirmation under the provisions of the section of th	aber or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this document benalties of perjury that the facts stated herein are true, in submitted in a document to the Department of State.
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The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)