

L14000192700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entry Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600308350156

FILED
18 JAN 30 AM 9:49
CLERK OF DISTRICT COURT
JANUARY 30, 2018
CLERK OF DISTRICT COURT

FEB 12 2018

✓ SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 1, 2018

CSC

SUBJECT: RETIREMENT SYSTEMS OF AMERICA, LLC
Ref. Number: L14000192700

We have received your document for RETIREMENT SYSTEMS OF AMERICA, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

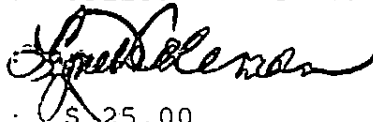
Letter Number: 518A00002141

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 051239 4726940

AUTHORIZATION



COST LIMIT : \$ 25.00

ORDER DATE : January 31, 2018

ORDER TIME : 2:51 PM

ORDER NO. : 051239-005

CUSTOMER NO: 4726940

DOMESTIC AMENDMENT FILING

NAME: RETIREMENT SYSTEMS OF AMERICA,
LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS: _____

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.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:

Retirement Systems of America, LLC

Enter Name of Florida Limited Liability Company

2. The name of the "Converted or Other Business Entity" is:

Retirement Systems of America, LLC

Enter Name of "Converted or Other Business Entity"

3. The "Converted or Other Business Entity" is a **limited liability company**
(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 **Indiana**
(Enter state, or if a non-U.S. entity, the name of the country.)
on **January 30, 2018**
(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: **January 31, 2018**
(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.")

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

FILED
CLERK OF THE
SOUTH FLORIDA
JAN 31 2018

18 JAN 31 AM 9:49

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":

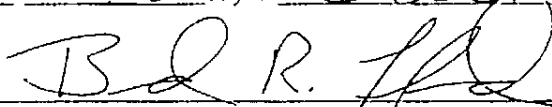
a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address: 1500 N. Oak Drive, Plymouth, IN 46563

Mailing Address: 1500 N. Oak Drive, Plymouth, IN 46563

7. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 31st day of January, 2018

Signature: 

Must be signed by a Member or Authorized Representative

Printed Name: Brad R. Lankford Title: Authorized Representative

Fees: Filing Fee: \$25.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

LED
18 JAN 31 AM 10:49
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA