L160007/389

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<u></u>
(Cit	ty/State/Zip/Phone	+)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



200280069462

01/25/16--01004--007 **150.00



Office Use Only

M16-7868

MB

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Rose REALTY + Assoc LLC (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
RHONDA ROSE (Contact Person) ROSE REACTY + ASSOC. LLC (Firm/Company)
1541 SUNSET DR STE. 302 (Address) (City, State and Zip Code) Thondup rose really many. Lom
E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: RHONDA ROSE at (305) 992 7788
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of Status \$180.00 Filing Fees and Certified Copy (Certified Copy, and Certificate of Status)
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



February 3, 2016

RHONDA ROSE 1541 SUNSET DR., STE.302 CORAL GABLES, FL 33143

SUBJECT: ROSE REALTY & ASSOC. LLC

Ref. Number: W16000007868

We have received your document for ROSE REALTY & ASSOC. LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Correct the name listed on the "Articles of Conversion" as it is filed in our records. See the attached print-out.

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

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) 245-6052.

Maryanne Dickey Regulatory Specialist II

Letter Number: 716A00002353

Articles of Conversion

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.6052045, Ebrida Statutes. 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:

ROSE REACTY + 19550 CIATES, LAW.

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on APRIL 8 1993 (date of organization, formation or incorporation) (Enter state, or if a non-U.S. entity, the name of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
ROSE REALTYN ASSOC., LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: /-/4-16. (The effective date: 1) cannot be prior to date of receipt or filed date 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 listed in the attached Articles of Organization, if an effective date is listed therein.) 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.

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 14 day of TANJARY	_20	
Signature of Authorized Representative of Limi		
Signature of Authorized Representative: Printed Name: RHONDA ROSE	Mola Rose Title: PRES.	-
Signature(s) on behalf of Other Business Entity:		
Signature: Rhonda Roy		
Printed Name: RHONDA ROSE	Title: PRES	ें हैं हैं
Signature:		APR
Printed Name:	Title:	
Signature		ágig a-ri
Signature:Printed Name:	Title:	
		27 -
Signature:Printed Name:	Title:	
		,
Signature:Printed Name:	Title:	•
Signature:Printed Name:	Tisla	•
Timed Name.	Title.	
If Florida Corporation:	0.00	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc		
If Florida General Partnership or Limited Liabili		
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
ROSE REALTY + I (Must end with the words "Limited Liability	Y Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	To The second se
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1541 SUNSET DRIVE	<u> </u>
MORAL GABLES, FL 33143	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
RHONDA Name	Ros <u>e</u>
1541 Sunset Dillo Florida street address (P.O.	E STE. 302 Box <u>NOT</u> acceptable)
CONAL GABLES City	FL 33143 Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AのBR	RHONDA ROSE
	1541 SULISET DRIVE STE 300
	CORAL GABLES, FL 33143
	ကြွန်း ယ
	?
(Use attachment if necessary)	
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.) If the date inserted in this block does not mee	ne date of filing: (OPTIONAL) t be specific and cannot be more than five business day t the applicable statutory filing requirements, this date will not be liste's records.
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.) If the date inserted in this block does not mee ent's effective date on the Department of State	t be specific and cannot be more than five business day t the applicable statutory filing requirements, this date will not be list
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.) If the date inserted in this block does not mee ent's effective date on the Department of State	t be specific and cannot be more than five business day t the applicable statutory filing requirements, this date will not be list
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.) If the date inserted in this block does not mee ent's effective date on the Department of State	t be specific and cannot be more than five business day t the applicable statutory filing requirements, this date will not be list
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.) If the date inserted in this block does not mee ent's effective date on the Department of State ICLE VI: Other provisions, if any.	t be specific and cannot be more than five business day t the applicable statutory filing requirements, this date will not be list e's records.
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.) If the date inserted in this block does not mee ent's effective date on the Department of State ICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	t be specific and cannot be more than five business day t the applicable statutory filing requirements, this date will not be list e's records.
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.) If the date inserted in this block does not mee ent's effective date on the Department of State ICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb This document is executed in I am aware that any false infor	t the applicable statutory filing requirements, this date will not be list e's records.
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.) If the date inserted in this block does not meet ent's effective date on the Department of State ICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb This document is executed in I am aware that any false inforconstitutes a third degree felorical effective date on the Department of State ICLE VI: Other provisions, if any.	t the applicable statutory filing requirements, this date will not be list e's records. Compared to the applicable statutory filing requirements, this date will not be list e's records. er or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. mation submitted in a document to the Department of State

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ARTICLE IV-