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(Requ	uestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
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SECRETARY OF STATE

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COVER LETTER

SUBJECT: \nearrow	i Ch mond J(Name of Res	+ Cherr	JL.L.C.	
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 corre	espondence concerning	g this matter to:		
Tational Cherry & 930 Uni Out Charlo	(Contact Person) (Contact Person) (Firm/Company) (Firm/Company) (Address) (Address) (Address) (Address) (City, State and Zip Code)	LC ENW 133948		
E-mail Address: (to be used for future annual report potifications)				
For further information concerning this matter, please call: Total (Name of Contact Person)				
	a bank located in the l		ed by this office must be payable in 0.5	
☐ \$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	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS New Filing Section	S:	MAILING A New Filing So		

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

TO: New Filing Section

Division of Corporations

Articles of Conversion For "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.605.1045, Florida Statutes.

The name of the Other Business Entity immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on The Composition of the Compos
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the date this document is filed by the Florida Department of State.)
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.

6. 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 26 day of FORUNY	20 1 8
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Chery Printed Name: 1011010 Chery	one they Title: monager
Signature(s) on behalf of Other Business Entity:	•
Signature: Colfonal Chery Printed Name: Total Chery	7 magnetta ac
Printed Name: 10+10174 (VICYY	Title: [Y]([YC(GE)
Signature:	mu
Printed Name:	I itle:
Signature:	
Printed Name:	_ Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: 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.	ty Partnership:
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:
Richmond A Cherry L.L.C. (Must contain the words "Limited Liability Company. "L.L.C." or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
130 LINNOENTERIOCE 430 Linnaen Terrage NIW 100 Port Charlotte. FG33148 PORT Charlotte FG3348
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Icitiana Cheny
Plorida street address (P.O. Box NOT acceptable)
Port Charlotte FL 33948
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)

A	R	ΤI	C	L	E	I	V	_

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:				
"MGR" = Manager	Tatiana Chery 930 vinnaen terrace NW 1600+ Charlotte FL,37948				
-					
(Use attachment if necessary)					
ARTICLE V: Other provisions, if any.					
REQUIRED SIGNATURE:	10. Ghers				
Signature of a member or : This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that				
any false information submitted in a docur as provided for in s.817.155. F.S.	nent to the Department of State constitutes a third degree felony				
tationa Un	Ded of printed name of signee				
ı yı	Filing Fees				

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)