L1800 194470

(Requestor's Name)
(Address)
(Address)
(//00/033)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
}
i



700316653037

08/13/18--01034--032 *•185.00

TALL THE STAR

Office Use Only

M MOON AUG 1 4 2018

COVER LETTER

Division of C	Corporations				
SUBJECT: Right Dy	namics, LLC				
	(Name of Re	sulting Florida Lir	nited Cor	mpany)	
				nd fees are submitted to accordance with s. 605.	
Please return all corr	espondence concernin	g this matter to):		
Blake Wilson					
	(Contact Person)				
Right Dynamics, LLC					
	(Firm/Company)				
1730 Fern Palm Dr S7	E G				
	(Address)				20 00 P
Edgewater, Florida, 32	2132				18 AUG 13 PH 5: 40
	City, State and Zip Code)	,			ر الله الله الله الله الله الله الله الل
blake@rightdynamics.	com				2
E-mail Address: (to b	oe used for future annual re	port notifications))		بي ري م
For further informati	on concerning this ma	tter, please call	l:		. 5
Blake Wilson		at (⁷⁷⁰	355-	3845	
(Name of Conta	act Person)		le) (Dag	ytime Telephone Number)	
	for the following amou a bank located in the		proces	sed by this office must	be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified C		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES	S:	MAI	LING	ADDRESS:	
New Filing Section			Filing S		
Division of Corporat	ions	Divis	ion of C	Corporations	
Clifton Building		P. O.	Box 63	127	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO: New Filing Section

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 Business Entity" immediately prior to the filing of the Articles of Conversion is:

Right Dynamics, LLC

M 1800406982 (Enter Name of Other Business Entity)
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
(Enter state, or if a non-U.S. entity, the name of the country)
3/11/2016 on .
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Right Dynamics, LLC
(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.
$\mathbf{S}_{\cdot\cdot\cdot}^{\cdot}$

Signed this 8th day of August	20 18
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Joshua Blake Wilson	BU WIL Title: CEO
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)
Signature: M. Bh. W.L. Printed Name: Joshua Blake Wilson	
Printed Name: Joshua Blake Wilson	Title: CEO
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

18 AUG 13 PH 5: 4

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Right Dynamics, LLC	
	ted Liability Company, "L.L.C.," or "LLC.")
ADTICLE II. Addison.	
ARTH FRII ANDVOCC	
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Company i
	of the principal office of the Limited Liability Company i
	of the principal office of the Limited Liability Company i Mailing Address:
The mailing address and street address	

The name and the Florida street address of the registered agent are:

business entity with an active Florida registration.)

Joshua Blake Wilson	
Na	me
3819 Schoolway Ave	
Florida street address (P	.O. Box NOT acceptable)
New Smyrna Beach	FL 32169
City	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)

A	D	TI	C'	L C	IV-
	ĸ		1 1	. r.	

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

Title:	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager				
MGR	Joshua Blake Wilson			
	3819 Schoolway Ave			
	New Smyrna Beach, FL 32169			
	As =			
	ro p			
	20 G			
(Use attachment if necessary)				
• ,				
CLE V: Other provisions, if any.				
	···			
	Ç			
REQUIRED SIGNATURE:				
	V:l_			
	an authorized representative of a member			
	with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo			
as provided for in s.817.155, F.S.	ment to the repartment of state consutures a tiffic degree leto			
Joshua Blake Wilson				
rps	1			

Typed or printed name of signee

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)