

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	rsiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE TALLAHASSEE, FL

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#### **COVER LETTER**

<b>TO:</b> New Filing S Division of C					
	nrichment Holdings, LLC				
BUBULCI.	(Name of Res	sulting Florida Limi	ted Con	npany)	
		_		d fees are submitted to convert an "Othecordance with s. 605.1045, F.S.	ner
Please return all corr	espondence concernin	g this matter to:			
Shivon Patel, Esq.					
	(Contact Person)		-		
The Principal Law Firm,	P.L.				
	(Firm/Company)		_		
4907 International Parky	vay. Suite 1061				
	(Address)		-		
Sanford, Florida 32771					
((	City, State and Zip Code)		-		
realtyenrichmentgroup	@gmail.com				
E-mail Address: (to b	e used for future annual re	port notifications)	-		
For further informati	on concerning this ma	tter, please call:			
Shivon Patel, Esq.		_at (	) 322-3	003	
(Name of Conta	ct Person)			time Telephone Number)	
	or the following amou a bank located in the		rocess	sed by this office must be payable in U	S
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	,
STREET ADDRES New Filing Section	S:	<b>MAIL</b> New F		ADDRESS: ection	

Division of Corporations

Tallahassec, FL 32314

P. O. Box 6327

### INHS11 (7/17)

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

 $f(x) = \{x \in \mathbb{R}^n : |x| \leq x\}$ 

#### **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:  Realty Enrichment Holdings, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company MG - GOC  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
10/18/2016
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Realty Enrichment Holdings, 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.



Signed this 10th day of December	
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:   Printed Name: Nichole Roberts	Sunto
Signature of Authorized Representative: —/ O/O	Tid - Authorized Member
Printed Name: Nichole Roberts	I III 6: Varioused wember
Signature(s) on behalf of Other Business Entity: Signature:	•
Printed Name: Nichole Roberts	Title: Authorized Member
G' .	
Signature:Printed Name:	April 1
Printed Name:	1 itle:
Ciamptora	
Signature:Printed Name:	Title
Timed Name.	11(16
Signature:	
Signature: Printed Name:	Title <sup>.</sup>
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of one General Lattier.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
<del></del>	
All others: Signature of an authorized person.	
Fees:	\$25.00 \$125.00 \$30.00 (Optional)
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
a el tratació de de termos	Total (Optional)

ROIS DEC 13 AM 10: 12 SECRETARY DE STATE

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Realty Enrichment Holdings, LLC  (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:	ess:
450 S Orange Avenue, 3rd Floor450 S Orange Avenue Aven	<del></del>
ARTICLE III - Registered Agent, Registered Office, & Regi (The Limited Liability Company cannot serve as its own Registered Agent. You mus business entity with an active Florida registration.)  The name and the Florida street address of the registered agent a Nichole Roberts	designate an individual or another
Name	<del></del>
450 S Orange Avenue, 3rd Floor	
Florida street address (P.O. Box NOT acce	ptable)
Orlando FL 32801	
City Zi	p
Having been named as registered agent and to accept service of liability company at the place designated in this certificate, is registered agent and agree to act in this capacity. I further agrestatutes relating to the proper and complete performance of maccept the obligations of my position as registered agent as Registered Agent's Signature (REQUIR	hereby accept the appointment as ee to comply with the provisions of all by duties, and I am familiar with and provided for in Chapter 605, F.S

(CONTINUED)



#### ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	0 8 4
AMBR	Casey Roberts
	450 S Orange Avenue, 3rd Floor
	Orlando, Florida 32801
AMBR	Nichole Roberts
	450 S Orange Avenue, 3rd Floor
	Orlando, Florida 32801
	201
	<u> </u>
(Har otto sharest 'Conserve)	HASSEE, F
(Use attachment if necessary)	SSE 3
	in in
ICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
hkoberto	
This document is executed in accordance	r an authorized representative of a member re with section 605.0203 (1) (b), Florida Statutes. I am aware that tument to the Department of State constitutes a third degree felony
Nichole Roberts	
Ty	yped 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)