L2000127172

(Requ	estor's Name)	i
(Addre	ess)	
(Addre	ess)	
(City/5	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Na	me)
(Docu	ment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ing Officer:	

Office Use Only



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K Bunupley

COVER LETTER

то:	New Filing Sc Division of Co				
SHR	JECT: DKJ RAM	LLC			
300.	JEC1	(Name of Resu	lting Florida Limit	ed Com	pany)
The e Busir	enclosed Articles ness Entity" into	of Conversion, Article a "Florida Limited Lia	es of Organizati bility Company	on, and	I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Pleas	e return all corre	spondence concerning	this matter to:		
Lisa	B. Mohan, Paraleç	gal		_	
		(Contact Person)		_	
Gord	on Feinblatt LLC			_	
		(Firm/Company)			
233 1	East Redwood Str	eet		_	
-		(Address)			
Balti	more, MD 21202				
	((City, State and Zip Code)		_	
rizzo	_daniel@yahoo.c	om		_	
E	-mail Address: (to b	e used for future annual re	port notifications)		
For	further informati	on concerning this ma	ter, please call:		
Lisa	B. Mohan, Parale	gal	at (410	576-4	time Telephone Number)
	(Name of Conta	ct Person)	(Area Code) (Day	time Telephone Number)
Encl dolla	losed is a check fars and drawn on	or the following amou a bank located in the	nt: (All checks United States)	process	sed by this office must be payable in US
(\$25 & \$1	150.00 Filing Fees for Conversion 25 for Articles ganization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	•	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 27		New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303

INHS11 (7/17)

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: DKJ RAM LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a [imited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(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)
October 25, 2016 on .
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
DKJ RAM 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 15+ day of May	20 <u>20</u> .
Signature of Authorized Representative of Limite	
Signature of Authorized Representative: Printed Name: Daniel L. Rizzo	Title: Manager
Signature(s) on behalf of Other Business Entity: [S	
Signature: January J. Jayar Printed Name: Daniel L. Rizzo	Title: Manager and Authorized Person
Signature: Printed Name:	Title:
Signature: Printed Name:	
Signature: Printed Name:	_Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Difficer. orporator 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 ALL General Partners.	y <u>Limited Partnership:</u>
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 LIARILITY COMPANY

KTICLES OF OF	GANIZATION FO	RFLOR	IDA LIMITED	LIABILITY COMPANY
RTICLE I - Nam				
he name of the Lin	nited Liability Compa	ny is:		
OKJ RAM LLC				
	contain the words "Limited	Liability Com	pany, "L.L.C.," or "L	I.C.")
ARTICLE II - Add	ress:			
		the princip	al office of the l	limited Liability Company is:
Principal Office Ac	ldress:	<u>M</u> :	riling Address:	
324 South Palm Aver	ue, Unit 10	53	42 Clark Road, #3	3089
Sarasota, FL 34236		Sa	rasota, FL 34233	
ARTICLE III - Re the Limited Liability Cor business entity with an ac	apany cannot serve as its own	stered Off Registered A	ice, & Registere gent. You must desig	ed Agent's Signature: nate an individual or another
he name and the F	orida street address of	Tthe regist	ered agent are:	
_	Daniel L. Rizzo			
		Name		
	524 South Palm Avenue	, Unit 10		
	Florida street address	(P.O. Box	NOT acceptabl	e)
<u>;</u> -	Sarasota		FL 34236	
	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, E.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Daniel L. Rizzo
MOX.	5342 Clark Road, #3089
	Sarasota, FL 34233
	
	<u>.,</u>
	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
TLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
TLE V: Other provisions, if any.	
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	7.
REQUIRED SIGNATURE:	7.
	7. W
REQUIRED SIGNATURE:	7.
REQUIRED SIGNATURE:	or an authorized representative of a member
Signature of a member of This document is executed in accordan any false information submitted in a doc	ce with section 605.0203 (1) (b), Florida Statutes, I am aware (
REQUIRED SIGNATURE: January January Signature of a member of this document is executed in accordant.	or an authorized representative of a member see with section 605.0203 (1) (b), Florida Statutes, I am aware seument to the Department of State constitutes a third degree fel
Signature of a member of This document is executed in accordan any false information submitted in a doc as provided for in s.817.155, F.S.	ce with section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member of This document is executed in accordan any false information submitted in a document is a sprovided for in s.817.155, F.S. Daniel L. Rizzo	ce with section 605.0203 (1) (b), Florida Statutes. I am aware

ARTICLE IV-