L2100016991

(Re	questor's Name)	
(Ad	dress)	
		·
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	lling Officer:	

Office Use Only

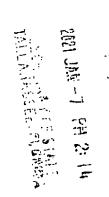
MAN 2 2 2021

T. SCOTT



800357494668

01/07/21-+01011--020 **300.00



COVERELETTER

TO:	New Filing S Division of C					
SUBJ	ECT: Red Cas	stle RE Ventures, LLC				•
			sultin	g Florida Lim	ited Co	empany)
						and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	return all corr	respondence concernin	g thi	s matter to:		
Renee	' Caputi					
	-	(Contact Person)			_	
Red C	astle RE Ventur	es. LLC				
	.	(Firm/Company)			_	
3031 (Crum Road					
		(Address)			_	
Brooks	ville, FL 34604					
		City, State and Zip Code)			_	
renee.c	·	eyouralpha.com				
	* **** ****	be used for future annual re	nort r	notifications)	-	
			-			
For fu	ther informati	on concerning this ma	tter,	please call:		
Renee'	Caputi		at	954	361	-4410
	(Name of Conta	ect Person)) (D:	nytime Telephone Number)
		or the following amou a bank located in the			proce	ssed by this office must be payable in US
(\$25 for & \$125	.00 Filing Fees Conversion for Articles nization)	☐\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing Certified Co	-	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Addi New Filing So					et Address: Filing Section
	Division of C	orporations			Divi	sion of Corporations
	P.O. Box 632	7			The	Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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: Red Castle RE Ventures, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is aLimited Liability Corporation
(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)
on July 29, 2020 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Red Castle RE Ventures, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: [Jan. 8, 2021]
(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.

Signe	d this 1st	_ day of January	20 <u>_</u> 21
		ized Representative of Lin	
G.			Title CEO & Managing Member
Signa Drinta	ture of Authoriz 4 Nones Renee!	ced Representative: < \u2012\u2012	Till CEO 8 Managing Momber
rime	d Manne: Nenee	Caputi	TITIE CEO & Managing Member
			[See below for required signature(s)]
Signat	ure: Tene	e(cook	Title: CEO & Mng Mbr & Incorporator
Printe	d Name: Renee'	Caputi	Title: CEO & Mng Mbr & Incorporator
Signat	ure:		Title:
Printe	J Name:		Title:
- Signat - Printe <i>d</i>	d Name:		Title:
Signat	ure:		
Printed	l Name:		Title:
Signati	ure:		Title:
Printec	1 Name:		Title:
Simon	uro:		
Printec	l Name:		Title:
	. 1 (03110)		
If Flor	ida Corporatio	n:	
Signati	are of Chairman	Vice Chairman, Director, or	Officer.
If Dire	ctors or Officers	have not been selected, an Ir	corporator must sign.
If Flor	<u>ida General Pa</u>	rtnership or Limited Liabil	ity Partnership:
Signatt	ire of one Gener	at Partner.	
If Flor Signati	ida Limited Pa ires of ALL Ger	rtnership or Limited Liabili ieral Partners.	ty Limited Partnership:
-			
All oth			
Signati	ire of an authori	zed person.	
<u>Fees:</u>			
	Articles of Cor	Werelaw:	\$25.00
		a Articles of Organization:	\$25.00 \$125.00
	Certified Copy		\$30.00 (Optional)
	Certificate of S		\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	any is:	
Red Castle RE Ventures, LLC		
(Must contain the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
3031 Crum Road	3031 Crum Road	
Brooksville, FL 34604	Brooksville, FL 34604	
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address o		individual or another
Renee' Caputi		
	Name	
3031 Crum Road		
Florida street address	s (P.O. Box NOT acceptable)	
Brooksville	FL 34604	
City	Zip	
Having been named as registered agent liability company at the place designa registered agent and agree to act in this c	and to accept service of process for	or the above stated limited

	T 3	 _		T'-	7 2	•
٠.٦	w	IC	•	1.		V _
	1	 	1	1		• -

Renee' Caputi

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	Be and One wi
AMBR	Renee' Caputi
	3031 Crum Road
	Brooksville, FL 34604
Mgr	Renee' Caputi
<u></u>	3031 Crum Road
	Brooksville, FL 34604
Mgr	Heather Schwarz
	2149 Conley Drive
	Vineland, NJ 08361
	. <u></u>
(Use attachment if necessary)	
·	
LE V: Other provisions, if any,	
222 Tomer provisions, it may.	
REQUIRED SIGNATURE:	
Line's Con	
- ence cone	
Signature of a mostly as	an authorized community that f
Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am award

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)