12100063070

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only

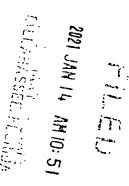
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COVER LETTER

New Filing Section Division of Corporations Red Team Wests UC
(Name of Resulting Florida Limited Company) 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 correspondence concerning this matter to: Red Team Wests
(Firm Company) 1208 Via Tripoli
(Address) Donna C. Ked Team Wents. com E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: at (804) 301-7800 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) ☐\$180.00 Filing Fees S185.00 Filing Fees, S155.00 Filing Fees ☐ \$150.00 Filing Fees Certified Copy, and and Certified Copy (\$25 for Conversion and Certificate of

Mailing Address:

& \$125 for Articles

of Organization)

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Status

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 8107
Tallahassee, FL 32303

Certificate of Status

2021 JAN 14 AM IO. E.

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:
Red Team Events UC (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(dute of organization, fermation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Red Team Events UC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (ASA?)
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 locument's effective date on the Department of State's records.
. 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.

中华美国人工工会员的企业的企业的企业工程的**经验**的 signed this 5th day of January 2021 Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: Donna L. Lu-Printed Name: Donna P. Lee Tille: Owner/Organizer Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Dona K. Signature: Donna P. Lee
Printed Name: Donna P. Lee Title: Signature: Printed Name: ______Title: _____ Signature: Printed Name: Title: Signature: Printed Name: ______ Title: _____ Signature: Printed Name: Title: _____ Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fces:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Andree:	TOLLI Y COMPANY
The name of the Limited Line	· - •
The name of the Limited Liability Compa	nv is-
•	··y ia,
\mathcal{D}	
Red Team Events LLC	
(Must contain the	Liability Company, "L.L.C.," or "L.L.C.")
Contain the Words "Limited	Liability Company of L. C.
ARTICLE II - Address:	3 company. L.L.C., "or "L.LC.")
The Addition of the Addition o	
The mailing address and street address as	.t. , ,
addic22 01 i	the principal office of the Limited Liability Company is:
Principal Office Address:	= moving Company is.
omee Audress:	Mailing Address:
1200 11. 1. 11	
1208 Via Tripoli	1700 Via Taradi
Punta Gorda, PL 33950	1208 Via Tripoli
	Punta Gorda, FL 33950
ADTICLE III Dester Annual	•
Registered Agent, Regis	tered Office, & Registered Agent's Signature:
The Charles Committy Committy Children Serve as its again	Registered Agent. You must designate an individual or another
business entity with an active Florida registration.)	
The name and the Florida street address of	Patra de Para de Caración de C
The name and the Florida street address of	the registered agent are:
7	
<u>Donna</u> L	
1	Name
1208 Via	Tripoli
Florida street address	(P.O. Box NOT acceptable)
1 ioitua succi addiess	(F.O. Dox NOT acceptable)
Prenta Concle	N 77 ACA
Punta Gordo	FL 33950
City	Zip
Having been named as registered agent a	nd to accept service of process for the above stated limited
lightlity company at the place designer	ed in this certificate, I hereby accept the appointment as
equistional acoust and acrea to act in this	ew in this certificate, I hereby accept the appointment as
registeren agent ana agree to act in this co	apacity. I further agree to comply with the provisions of all
statutes relating to the proper and comp	lete performance of my duties, and I am familiar with and
accept the obligations of my position a	s registered agent as provided for in Chapter 605, F.S.
\mathcal{T}_{\bullet}) (
1) mnat	. Cl
Pagistared A	C: /PEOUMPEN
Registered Agent's	Signature (REQUIRED)
	T. 19
(CON	TINUED)
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	and the second s
	9 O. C.
	E'' CA

The name and address of each person authorized to manage and control the Limited Liability Сопірапу: Ti<u>tle:</u> "AMBR" = Authorized Member Name and Address: "MGR" = Manager AMBR unta Gorda, FL 33950 AMBR Michael J. Lee 1208 Via Tripoli Punta Gorda, PL 33950 (Use attachment if necessary) ARTICLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 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)

ARTICLE IV-