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(Re	questor's Name)			
(Address)				
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO:	New Filing S Division of C				
		,			
SUB.	JECT: RIMA Pa				
		(Name of Re	sulting Florida I	Limited Cor	npany)
The e Busin	enclosed Article ness Entity" into	s of Conversion, Artico a "Florida Limited L	les of Organ iability Com	zation, ar pany" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g this matter	to:	
Richa	rd L. Wahl				
-		(Contact Person)			
RIMA	Management an	nd Hospitality			
		(Firm/Company)		· - ·	
2036	Bispham Road				
		(Address)			
Saras	ota, FL 34231				
	(1	City, State and Zip Code)			
rlw@r	imamanagemen	tandhospitality.com			
E-r	nail Address: (to b	e used for future annual re	port notification	ns)	
For fi	irther informati	on concerning this ma	tter, please c	all:	
Richa	rd L. Wahl		_at (_\ 716-	2220
	(Name of Conta	ict Person)	(Area C	ode) (Day	rtime Telephone Number)
Enclo dollar	sed is a check f is and drawn on	or the following amou a bank located in the	int: (All chec United States	ks proces:	sed by this office must be payable in US
(\$25 fo & \$125	60.00 Filing Fees or Conversion 5 for Articles anization)	☐S155.00 Filing Fees and Certificate of Status	S180.00 Find Certified		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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.

(Enter Name of Other Business Entity)	<u> </u>
2. The "Other Business Entity" is a limited liability company	
(Enter entity type. Example: corporation, limited partnership, general partnership, com	mon law or business trust, etc.)
First organized, formed or incorporated under the laws of	
November 14, 2018	the name of the country)
on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached A	rticles of Organization:
RIMA Partners 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 standary filing requirements, this edocument's effective date on the Department of State's records.	fate will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statutes	S.
6. The "Converted or Other Business Entity" has agreed to pay any members having appr which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	
	2021 HAR -5
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	5 J.

Signed this day of January	20 <i>&_(</i>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Richard L. Wahl	Title: General Managing Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: Richard L. Wahl	Title: Authorized Member
Signature:	Title. Additionaged Member
	Title: General Managing Member
Signature: / Printed Name: Ryan Streicher	Title: Special Manager
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabili Signature of one General Partner.	Officer. corporator must sign.
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
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 LIABILITY COMPANY

ARTICLE 1 - Name:			
	ed Liability Company is:		
RIMA Partners LLC			
(Must co	ntain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addre	88:		
The mailing address ar	nd street address of the pr	incipal office of the Limite	ed Liability Company is:
Principal Office Addi	ress:	Mailing Address:	
2036 Bispham Road		2036 Bispham Road	
Sarasota, FL 34231		Sarasota, FL 34231	
	·		
(The Limited Liability Compa business entity with an active The name and the Flor	ny cannot serve as its own Regist		individual or another
203	6 Bispham Road		
	orida street address (P.O	. Box NOT acceptable)	
Sar	asota	FL 34231	
	City	Zip	
liability company registered agent and statutes relating to .	at the place designated in agree to act in this capac the proper and complete p	o accept service of process for this certificate, I hereby active. I further agree to compositive formance of my duties, activities agent as provided for the composition (REQUIRED)	cept the appointment as ly with the provisions of al nd I am familiar with and

(CONTINUED)

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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					
AMBR	Richard L. Wahl				
	2036 Bispham Road				
	Sarasota, FL 23431				
General Managing Member	Richard L. Wahl				
	2036 Bispham Road				
	Sarasota, FL 23431				
(Use attachment if necessary)					
CLE V: Other provisions, if any.					
DECHIDED CLONATUDE.					
REQUIRED SIGNATURE:					
1000					
·					
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, Lam aware the				
any false information submitted in a document	nent to the Department of State constitutes a third degree felor				
as provided for in s.817.155, F.S.					
Richard L. Wahl					

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)