L21000319417

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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07/08/21--01014--015 **155.00





612 Cypress St. Suite #A Mary Esther FL. 32569 Ph. # 850-200-5745 rlw@rlwenterprise.com

RLW Enterprises Inc.

July 4, 2021

To: Division of Corporations New Filing Section

Re: Conversion

I assume that I am sending the correct information contained here. I am simply wanting to convert my existing company (RLW ENTERPRISES INC.) to an LLC (RLW ENTERPRISES LLC.).

If anything else is required please let me know.

Thank You.

Sincerely;

Randy Wilson; President

2021 Hr. - 0 - 8.1 5. 15.

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: RLW ENTERPRISES LI	LC	
SUDJECT:	me of Resulting Florida Limited	Company)
	-	, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all correspondence co	oncerning this matter to:	
RANDY WILSON		
(Contact Pers	on)	
RLW ENTERPRISES INC.		
(Firm/Compa	ny)	~)
612 CYPRESS ST SUITE #A		277) W
(Address)		· = 1
MARY ESTHER, FLORIDA 32569		 د
(City, State and Z	ip Code)	- 12- - 12- - 12-
RLW@RLWENTERPRISE.COM		ء۔ ص
E-mail Address: (to be used for future	annual report notifications)	:- ऽ1
For further information concerning	this matter, please call:	١٠٠
RANDY WILSON	at (850) ²	00-5745
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the followidollars and drawn on a bank locate		cessed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing and Certificate Status	-	es \$\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	N D TI 24	ereet Address: ew Filing Section ivision of Corporations he Centre of Tallahassee H5 N. Monroe Street, Suite 810 allahassee, FL 32303

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: RLW ENTERPRISES INC. # P0700006435
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a 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
9/25/2007 on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: RLW ENTERPRISES 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 <u>5</u>	day of JULY	_ 202_1
Signature of Aut	horized Representative of Limi	ted Liability Company:
		1///_
Signature of Auth	orized Representative:	mil PDES
Printed Name: RAN	IDY WILSON /	Title: PRES.
Signature(s) on bo	chalf of Other Business Entity:	See below for required signature(s)]
Signature:		
Printed Name: RAN	NDÝ WILSON	Title: PRESIDENT
	11/1/	
Signature:	7010	
Printed Name: RAN	IDÝ WILSON	Title: SECRETARY
	1/1/1	
Signature:	IDV MILESON	TOTACHDED
Printed Name: RAN	NDY WILSON	Title: TREASURER
Ciamatura		
Drinted Name:		Title:
i iiiica ivaine		
Signature:		888884
Printed Name:		Title:
Signature:		
Printed Name:		Title:
If Florida Corpor		0.44
_	man, Vice Chairman, Director, or	
If Directors or Off	icers have not been selected, an In-	corporator must sign.
If Florido Conora	d Partnership or Limited Liabili	ty Partnership
Signature of one G		ty raithership.
Signature of one of	reflectar i araber.	
If Florida Limited	d Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL		
All others:		
Signature of an au	thorized person.	
_		
<u>Fees:</u>		
4		#25.00
	Conversion:	\$25.00
	lorida Articles of Organization:	\$125.00
Certified (\$30.00 (Optional)
Certificate	of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:
RLW ENTERPRISES LLC.	
(Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the particle.	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
612 CYPRESS ST. SUITE #A	612 CYPRESS ST. SUITE #A
MARY ESTHER, FLORIDA	MARY ESTHER, FLORIDA
32569	32569
RANDY WILSON Nam	mc
612 CYPRESS ST. SUITE #	^t A
Florida street address (P.	O. Box NOT acceptable)
MARY ESTHER	FL ³²⁵⁶⁹
City	Zip
liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all a performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S
Registered Agent's Sig	gnature (KEQUIKED)

(CONTINUED)

ARTICLE IV-

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	RANDY WILSON	
	612 CYPRESS ST. SUITE #A	
	MARY ESTHER, FL. 32569	
MGR	RANDY WILSON	
	612 CYPRESS ST. SUITE #A	
	MARY ESTHER, FL. 32569	
PRES.	RANDY WILSON	
	612 CYPRESS ST. SUITE #A	
	MARY ESTHER, FL. 32569	
		
		
(Use attachment if necessary)		
CLE V: Other provisions, if any.		
REQUIRED SIGNATURE:	1//2	
	· · ·	
Signature of a mambar 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.

RANDY WILSON

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)