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| (Cit | y/State/Zip/Phon | e #) |
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| (Bu | siness Entity Nar | me) |
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| (Do | cument Number) | <u>. </u> |
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| Certified Copies | _ Certificate: | s of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

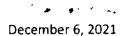
| Division of Corporations | | | |
|---|---------------------------------------|--------------------------------|---------|
| SUBJECT: RWM LLC | | | |
| (Name of Resulting | g Florida Limi | imited Company) | |
| The enclosed Articles of Conversion, Articles of Business Entity" into a "Florida Limited Liabili | | | |
| Please return all correspondence concerning this | s matter to: | o: | |
| RUSSELL MCCORMICK | | | |
| (Contact Person) | | | |
| RWM LLC | | | |
| (Firm/Company) | | | |
| 722 MCARTHUR AVE | | | |
| (Address) | | <u> </u> | |
| SARASOTA, FL 34243 | | | |
| (City, State and Zip Code) | | | |
| RUSSELL.MCCORMICK@ATT.NET | | | |
| E-mail Address: (to be used for future annual report | notifications) | <u></u> | |
| For further information concerning this matter, | please call: | II: | |
| RUSSELL MCCORMICK at | ₍ 317 | 796-3549 | |
| (Name of Contact Person) | · · · · · · · · · · · · · · · · · · · | de) (Daytime Telephone Number) | |
| Enclosed is a check for the following amount: (dollars and drawn on a bank located in the Unit | | • | e in US |
| \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | \$180.00 Filing d Certified Co | | |
| Mailing Address: | | Street Address: | |
| New Filing Section | | New Filing Section | |
| Division of Corporations | | Division of Corporations | |
| P.O. Box 6327 | | The Centre of Tallahassee | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section



Florida Division of Corporations PO Box 6327 Tallahassee, FL 32314

Subject: RWM LLC name change to RUWIMC LLC

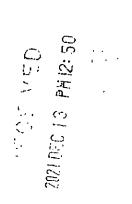
Ref Number: W21000079773

I, Russell McCormick, have now signed on the correct line on the previous documentation. After talking with Jessica Fason, she informed me that that was the only item holding the name change back from being approved. Attached is the original page, re-signed.

Please let me know if there's anything else that needs to be completed.

Thank you,

Russell McCormick



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: |
|--|-----------------------------|
| RWM+LC RUWIMC LLC (Enter Name of Other Business Entity) | |
| 2. The "Other Business Entity" is a LLC (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 na | |
| 01/01/2020 | |
| (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articl | es of Organization: |
| RWWILC RUWIMC 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 in 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 who becoment's effective date on the Department of State's records. | |
| 5. The plan of conversion has been approved in accordance with all applicable statutes. | |
| The "Converted or Other Business Entity" has agreed to pay any members having appraisal which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. | 2691 ECS 13 - 7Y-8: |
| • | <u>က</u> မာ |

| Sig | gned this 26TH day of APRIL | |
|--------------|---|--|
| Sig | nature of Authorized Representative of Lim | ited Liability Company: |
| Sig Prit | nature of Authorized Representative: 1 | My A RUM & 6/8/2 Title: OWNER |
| | nature(s) on behalf of Other Business Entity: | |
| k Sio | nature: flul Mlund nted Name: Russer McCornick | |
| Prir | nted Name: Russer McCornick | Title: OWNER |
| Sig | nature: | |
| Prir | nature:nted Name: | Title: |
| Sigi Prir | nature:nted Name: | Title: |
| | | |
| Prin | nature:nted Name: | Title: |
| Sign Prin | nature:nted Name: | Title: |
| Sign Prin | nature: | Title: |
| Sign If D | Clorida Corporation: nature of Chairman, Vice Chairman, Director, or Directors or Officers have not been selected, an In Clorida General Partnership or Limited Liabilinature of one General Partner. | corporator must sign. |
| Ŭ | | |
| | lorida Limited Partnership or Limited Liabili natures of <u>ALL</u> General Partners. | ty Limited Partnership: |
| | others: nature of an authorized person. | |
| Fees | <u>s:</u> | |
| | 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 - I | Name: e Limited Liability Compan | y is: | |
|---------------------------------|---|--|---|
| RWMLCC | RUWIMC LLC. (Must contain the words "Limited Li | iability Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - The mailing add | Address: tress and street address of the | he principal office of the Limited Liability Cor | npany is: |
| Principal Offic | e Address: | Mailing Address: | |
| 722 MCARTHUR | AVE | 722 MCARTHUR AVE | |
| | an active Florida registration.) ne Florida street address of RUSSELL MCCORMICK | | |
| | 722 MCARTHUR AVE | | |
| | Florida street address (| (P.O. Box NOT acceptable) | |
| | SARASOTA | FL ³⁴²⁴³ | |
| | City | Zip | |
| liability col registered age | mpany at the place designate nt and agree to act in this co- ting to the proper and comple obligations of my position a | | itment as visions of all r with and |
| | Registered Agent's | Signature (REQUIRED) | |

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

| RUSSELL MCCORMICK 722 MCARTHUR AVE SARASOTA, FL 34243 |
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| RUMY Clotzi |
| uthorized representative of a member section 605.0203 (1) (b), Florida Statutes. I am award the Department of State constitutes a third degree for the Department of State constitutes as the degree for the degree for the Department of State constitutes as the degree for the Department of State constitutes as the degree for the Department of State constitutes as the degree for the Department of State constitutes as the degree for the Department of State constitutes as the degree for the Department of State constitutes as the degree for the Department of State constitutes as the degre |
| or printed name of signee |
| |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)