# LOW 30528

(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:

T. SCOTT

JUL 112022



600388211166

04/13/22--01007--024 \*\*105.00

07/11/22~~01004~~020 \*\*45,00

### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attention: Tyrone Scott

Thank you for your help with our business registration.

We had originally sent in the form to 'Convert an entity into a Florida Profit Corporation." (The filing document number is W22000069685) This submission was in error. We had submitted payment for this previous application by check in the amount of \$105. The Check #1004 was cashed on April 13, 2022 Back of Check Tracking number reads 01007-024. Copies of the front and back are included.

Along with the correct forms to register our LLC with the state of Florida, and we have included an additional \$45 (Check #1005) payment to cover the total fee of \$150.

Thank you for your assistance,

David Nolan and Ulrike Christmann

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2022 JUH - 8 AM IO: 20

# **COVER LETTER**

	ling Section n of Corporations			
SUBJECT:	RCDN Homes, LLC			
SUBSECT.	(Name of Re	sulting Florida Lim	ited Con	npany)
				d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return al	ll correspondence concernin	g this matter to:		
Ulrike Christr	mann			
	(Contact Person)		_	
RCDN Home	e, LLC			
	(Firm/Company)			
6180 Mahaffe	ey Rd, Suite 310			
	(Address)	<del></del>	-	
Fort Myers, F	FL 33966			
	(City, State and Zip Code)	-	_	
Ulrike Christr	nann			
E-mail Addres	ss: (to be used for future annual re	port notifications)	_	
For further info	ormation concerning this ma	tter, please call:		
Ulrike Christr	mann	at ( 239	, 788-	-4833
(Name o	f Contact Person)	_ \	_ <i></i> :) (Day	time Telephone Number)
	heck for the following amou wn on a bank located in the		process	sed by this office must be payable in US
S150.00 Filing (\$25 for Conversion & \$125 for Article of Organization)	on and Certificate of	□\$180.00 Filing and Certified Co		□\$185.00 Filing Fees. Certified Copy. and Certificate of Status
New Fil Division P.O. Bo	g Address: ling Section n of Corporations ox 6327 ssee, FL 32314		New I Divisi The C 2415 l	Address: Filing Section on of Corporations fentre of Tallahassee N. Monroe Street, Suite 810 hassee, 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  RCDN Homes, LLC
(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.
(Enter entity type: Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Colorado  (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
06-08-2020 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:
RCDN Homes, 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 27th day of May	
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	Title: Director
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: . Ulrike Christmann	Title: Director
Signature: David J. Nolan	
Printed Name: David J. Nolan	Title: Director
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liabili	corporator must sign.
Signature of one General Partner.	ty rattiersmp.
If Florida Limited Partnership or Limited Liabilit 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 I - Nam The name of the Lir	ie: mited Liability Company	is:	
RCDN Hom	es IIC		
		bility Company, "L.L.C.," or "LLC,")	
ARTICLE II - Add The mailing address		principal office of the Limit	ted Liability Company is:
Principal Office Ac	ddress:	Mailing Address:	
6180 Mahaffey Rd,	Unit 310	6180 Mahaffey Rd, Unit	310
Fort Myers, FL 3396	6	Fort Myers, FL 33966	
(The Limited Liability Cor		red Office, & Registered A egistered Agent. You must designate a	
The name and the F	lorida street address of th	ne registered agent are:	
	Ulrike Christmann		
•	Na	ime	
	6180 Mahaffey Rd, Unit 3	<del></del>	
	Florida street address (P	P.O. Box NOT acceptable)	
	Fort Myers	FL <sup>33966</sup>	
	City	Zip	
liability compa registered agent a statutes relating	iny at the place designated and agree to act in this cap to the proper and comple igations of my position as	d to accept service of process d in this certificate, I hereby a pacity. I further agree to complete performance of my duties, registered agent as provided in the performance of my duties, registered agent as provided in the performance (REQUIRED)	iccept the appointment as ply with the provisions of all and and l

# ARTICLE IV-

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

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	10.71
MGR	Ulrike Christmann
	6180 Mahaffey Rd, Unit 310
	Fort Myers, FL 33966
MGR	David J. Nolan
	6180 Mahaffey Rd, Unit 310
	Fort Myers, FL 33966
	· · · · · · · · · · · · · · · · · · ·
·	
<del></del>	<del></del>
	<del></del>
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	
CLE V: Other provisions, if any.	
CI.E.V: Other provisions, if any.  REQUIRED SIGNATURE:  Umk CM	r an authorized representative of a member
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:  Umlk	r an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance any false information submitted in a document.	ce with section 605.0203 (1) (b), Florida Statutes. I am aware tha
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance.	r an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am aware that cument to the Department of State constitutes a third degree felon

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)

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

# CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

RCDN Homes, LLC

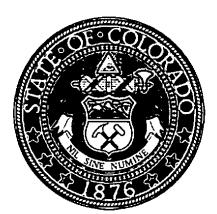
is a

### Limited Liability Company

formed or registered on 06/08/2020 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20201504888.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/23/2022 that have been posted, and by documents delivered to this office electronically through 03/25/2022 @ 07:45:25.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 03/25/2022 @ 07:45:25 in accordance with applicable law. This certificate is assigned Confirmation Number 13895593



Secretary of State of the State of Colorado

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*End of Certificate\*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sox.state.co.us.biz/CertificateSearch/riteria.do/entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sox.state.co.us/click/Businessex, trademarks, trade names/and select/Frequently Asked Questions."