122000309666

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(only-orate-ziph none h)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· ——
Special Instructions to Filing Officer.
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Office Use Only

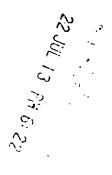


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2022 JUL 13 PM 2:5

B. CHATHAM JUL 14 2022



Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051

FROM . Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 7/13/2022

PRIORITY Regular Approval

OUR REF # (Order ID#) 1053675

ORDER ENTITY__ RUACH REALTY LLC

PLEASE PERFORM THE FOLLOWING SERVICES: RUACH REALTY LLC (FL)	••		- 	!
File the attached conversion document and subsquent articles of o	rganiza	ation.		
NOTES:				
\$150.00 Authorized Email address for annual report reminders: aguttman@altrolaw.com			-	

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

5 M (3 /4 6: 2)

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Wednesday, July 13, 2022 Page 1 of 1

Articles of Conversion

1. · · · ·

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)
2. The "Other Bus	
(Enter e	ntity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, for	med or incorporated under the laws of
-	(Enter state, or if a non-U.S. entity, the name of the country)
February 4, 2022	
(date of organizati	on, formation or incorporation)
3. The name of the	Florida Limited Liability Company as set forth in the attached Articles of Organization:
Ruach Realty LLC	
	(Carabia and Control of the Control
	(Enter Name of Florida Limited Liability Company)
4. If not effective of	
(The effective date the date this docu <u>Note:</u> If the date inser	on the date of filing, enter the effective date: E: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after ment is filed by the Florida Department of State.) ted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ate on the Department of State's records.
(The effective date the date this docu Note: If the date inser document's effective d	on the date of filing, enter the effective date: :: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after ment is filed by the Florida Department of State.) ted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this/7th day of	20_
Signature of Authorized Representative of	Limited jability Company:
Signature of Authorized Representative:	$(///_{2})$
Printed Name: Dixilee Robertson	Managing Member
Signature(s) on behalf of Other Business Enti	ity: [See below for required signature(s)]
Signature: Printed Name: Dixilee Mobertson	Title, Managing Member
Printed Name: Dixiee Moderson	Title: Managing Member
Signature:	
Printed Name:	Title:
0'	
Signature:Printed Name:	Til
rfinted Name:	TRIC:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director	
If Directors or Officers have not been selected, a	an Incorporator must sign.
tem is a line in the state of	140 B
If Florida General Partnership or Limited Lis	ability Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liz Signatures of <u>ALL</u> General Partners.	ability Limited Partnership:
All others: Signature of an authorized person.	

Fees:

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

2/11/3 8/16.25

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	Liability Company is	s:	
Ruach Realty LLC			
(Must conta	in the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.	")
ARTICLE II - Address The mailing address and		orincipal office of the Lin	nited Liability Company is:
Principal Office Addre	<u>ss:</u>	Mailing Address:	
6969 S. Tamiami Trail		6969 S. Tamiami Trail	
Sarasota, FL 34231		Sarasota, FL 34231	
(The Limited Liability Company business entity with an active F The name and the Florid North	cannot serve as its own Regiorida registration.) a street address of the swest Registered Agent, Name of the Street North, Suite	LLC 300 D. Box NOT acceptable)	
	etersburg	33702	
	City	FL ³³⁷⁰² Zip	-
liability company at registered agent and ag statutes relating to the	the place designated i gree to act in this capa g proper and complete	to accept service of proces in this certificate, I hereby city. I further agree to con performance of my duties	ss for the above stated limited accept the appointment as inply with the provisions of all and I am familiar with and d for in Chapter 605, F.S
	/s/ Tom Glover		
R	egistered Agent's Sig	nature (REQUIRED)	_

(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	Divitos Pobodos
AMBK	Dixilee Robertson 6969 S. Tamiami Trail
	Sarasota, FL 34231
AMBR	Gary Robertson
	6969 S. Tamiami Trail
	Sarasota, FL 34231
	Salasola, FL 34231
	
	<u> </u>
(Use attachment if necessary)	
(**************************************	
CLE V: Other provisions, if any.	
, ,, ,, ,, ,, ,, ,, ,	
A	
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 tha
any false information submitted in a docur	ment to the Department of State constitutes a third degree felon
as provided for in s.817.155, F.S.	,
Divilee Robertson	

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)