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DATE:

10/19/22

NAME: RICHY & VUE INVESTMENTS, LLC

TYPE OF FILING: CONVERSION

COST.

50.QN

RETURN: Carthid COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

SUBJECT: Richey & Vue Investments, LLC (Name of Resulting Florida Limited Company) The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. Please return all correspondence concerning this matter to: Joseph J. Doerr (Contact Person) Sullivan McGregor & Doerr (Firm/Company) 5200 N. Palm Ave., Suite 404 (Address) Fresno, CA 93704 (City, State and Zip Code) richeyvue@gmail.com E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Joseph J. Doerr (Name of Contact Person) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees S155.00 Filing Fees and Certificate of and Certificate of Status of Organization) Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32314 Tallahassee, FL 32303		iling So on of C	ection orporations			
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Fresno, CA 93704 (City, State and Zip Code) richeyvue@gmail.com E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Joseph J. Doerr (Name of Contact Person) at (559) 753-2806 (Name of Contact Person) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees (525 for Conversion and Certificate of Status of Organization) Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Now Filing Section Division of Corporations The Centre of Tallahassee Tallahassee, FL 32314	Sullivan McGre	egor & D	оегт			
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E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Joseph J. Doerr at (559)753-2806 (Name of Contact Person) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees S155.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 S559 (Area Code) (Daytime Telephone Number) (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S185.00 Filing Fees, Certified Copy, and Certified Copy and Certificate of Status Street Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	richevvue@am	•	ity, state and Elp code)			
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Joseph J. Doerr (Name of Contact Person) at (559) 753-2806 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) \$150.00 Filing Fees \$\Bigsim \text{S155.00 Filing Fees}\$ and Certificate of \$\text{s180.00 Filing Fees}\$ and Certified Copy \$\text{Certified Copy, and Certificate of Status}\$ Certificate of Status \$\text{Organization}\$ **Mailing Address:** New Filing Section** New Filing Section** Division of Corporations** Division of Corporations** Division of Corporations** The Centre of Tallahassee, FL 32314** Tallahassee, FL 32314** **Tallahassee, Tallahassee, Tallahasse						
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P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810						•
,			•		The C	Centre of Tallahassee
	Tallah	assee, F	FL 32314			•

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

SECRETARY OF COMPOSATIONS
22 OCT 20 AM 9: 16

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: Richey & Vue Investments, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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 name of the country)
12/17/2012 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:
Richey & Vue Investments, 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.

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

SECRETARY OF STATE OF STATE OF CORPORATION OF CORPORATION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Richey & Vue Inves		d Liability Company, "L.L.C.," or "LLC.")	
(10	nist comain the words. Emmed	in Limiting Conquiry, Tables, Or Case.	
ARTICLE II - A The mailing addre		f the principal office of the Limited	Liability Company is:
Principal Office	Address:	Mailing Address:	
13741 Judy Ave.		13741 Judy Ave.	
Hudson, FL 34667		Hudson, FL 34667	
(The Limited Liability of business entity with ar	Company cannot serve as its over a active Florida registration.) Florida street address of Bart Richey 13741 Judy Ave.	istered Office, & Registered Agen wn Registered Agent. You must designate an ind of the registered agent are: Name SS (P.O. Box NOT acceptable) FL 34667	22 OCT 20 AM 9: 16
	City	Zip	
liability com registered agen statutes relati	pany at the place design t and agree to act in this ng to the proper and con bligations of mylposition	at and to accept service of process for mated in this certificate, I hereby accept scapacity. I further agree to comply implete performance of my duties, and in as registered agent as provided for the scapacity of the scapacity	pt the appointment as with the provisions of all I am familiar with and

(CONTINUED)

A	R	T	\mathbf{C}	1.	Ĥ.	ľ	v.

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

11 A A A A A A A A A A A A A A A A A A	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Bart Richey
	13741 Judy Ave.
	Hudson, FL 34667
AMBR	Ka Vue
	13741 Judy Ave.
	Hudson, FL 34667
	11000017, 1 5 0 4 0 0 7
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) CLE V: Other provisions, if any.	
	M 1/2
CLE V: Other provisions, if any.	M M4 G 1/1/1
CLE V: Other provisions, if any.	Most & MM/
CLE V: Other provisions, if any.	M & W//
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document in a docum	with section 605,0203 (1) (b), Florida Statutes, I am aware th
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605,0203 (1) (b), Florid Statutes. I am aware the inent to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605,0203 (1) (b), FloridA Statutes. I am aware the inent to the Department of State constitutes a third degree felo AR7 E. RICHEU
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605,0203 (1) (b), Florida Statutes, I am aware th

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