230000012/2

(Requestor's N	me)
(Address)	
(Address)	
(City/State/Zip/	hone #)
PICK-UP WA	MAIL MAIL
(Business Entit	Name)
(Document Nur	nber)
Certified Copies Certif	cates of Status
Special Instructions to Filing Office	
opecial instructions to tilling office	
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Office Use Only



FLORIDA DEPARTMENT OF STATE Division of Corporations

2023.11 -3 Pil 4: 44

December 12, 2022

RICHAR A BIRKHOLD 25216 PELICAN CREEK CIR #102 BONITA SPRINGS, FL 34134

SUBJECT: RETHINKING SAFETY LLC

Ref. Number: W22000152760

We have received your document for RETHINKING SAFETY LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have design as the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call প্ৰ (850) 245-6052.

ARCEDRA JOHNSON Regulatory Specialist II

Letter Number: 322A00027535

12/28/22 made-Correction forms. Jee attached JA. Rinke

•		COVER LETT	ER			
TO: New Filing Sect						
Division of Corp Rethinking S SUBJECT:	Safety LLC		· · · · · · · · · · · · · · · · · · ·	<u> </u>	.8s-	- <i>i</i> 79
	(Name of Re	sulting Florida Limited C	Company)			
The enclosed Articles o Business Entity" into a	•)ther
Please return all corresp	ondence concernir	ng this matter to:				
Richard A. Birkhold						
Rethinking Safety LLC	(Contact Person)	.				
25216 Pelican Creek CIR	(Firm/Company) #102					
Bonita Springs, FL 34134	(Address)			ſĄ!	2	
(City Richard.birkhold@gmail.c	v. State and Zip Code) om			LAHAS	22 NOV 28	<u></u>
E-mail Address: (to be us	sed for future annual re	eport notifications)		RY =		
For further information	concerning this ma	atter, please call:			P	
Richard A. Birkhold		612 669 at ()	9-9043	31V1S	5: 52	
(Name of Contact I	Person)	(Area Code) (E	Daytime Telephone Number	er)		
Enclosed is a check for dollars and drawn on a l			essed by this office m	ust be paya	able in 1	US
(\$25 for Conversion ar	J\$155.00 Filing Fees and Certificate of tatus	☐\$180.00 Filing Fees and Certified Copy	S 185.00 Filing Fee Certified Copy, and Certificate of Status	25,		
Mailing Addres New Filing Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion porations	Nev Div The 241	eet Address: w Filing Section ision of Corporations c Centre of Tallahasse 5 N. Monroe Street, S lahassee, FL 32303	e		

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

	d attached Articles of Organization are submitted to conv			
-	a Florida Limited Liability Company in accordance with	s.605.1	1045,	Florida
Statutes.				
The name of the "Other Bu Rethinking Safety LLC	siness Entity" immediately prior to the filing of the Articles	of Con	versio	n is:
	(Enter Name of Other Business Entity) LLC sole proprietor			
2. The "Other Business Entity	" is a			
(Enter entity type. E	kample: corporation, limited partnership, general partnership, common li PA, USA	aw or bu	siness t	rust, etc.
First organized, formed or inc	orporated under the laws of			_
07/01/2017	(Enter state, or if a non-U.S. entity, the na	me of the	e counti	ry)
on(date of organization, formation	or incorporation)	SEC TALL	22 NO	-
3 The name of the Florida Li	mited Liability Company as set forth in the attached Article		Saniz	l] z atio n
Rethinking Safety LLC	mited Liability Company as set forth in the attached Article	SSE	ж ж	
			70	
(Enter	Name of Florida Limited Liability Company) 11/21/2022		PH 5:	D
4. If not effective on the date	of filing, enter the effective date:	35 f	/) ?\	
(The effective date: Cannot l	pe prior to date of receipt or filed date nor more than 90 o	alenda	r day	s after
	d by the Florida Department of State.) ck does not meet the applicable statutory filing requirements, this date w partment of State's records.	ill not be	: listed	as the
5. The plan of conversion has	been approved in accordance with all applicable statutes.			
	siness Entity" has agreed to pay any members having appraisal itled under ss. 605.1006 and 605.1061-605.1072, F.S.	rights th	he amo	ount to

Signed this 28 day of December	20_22
Signature of Authorized Representative of Lim	ited Liability Company:
	3 0 A Q: 111/
Signature of Authorized Representative:	facel H. Disapel
Printed Name: Richard A. Birkhold	Title: Managec
Signature(s) on behalf of Other Business Entity:	
Signature: Lichard A. Bick	112
Signature: A. Birkhold	Tide Manager
Printed Name: richard A. Birkipid	Title: Manager
Signature	
Signature:Printed Name:	Title
Timed (value)	11110.
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	
If Directors or Officers have not been selected, an In	corporator must sign.
TOTAL COLUMN ASSESSMENT	the Decade and the
If Florida General Partnership or Limited Liabili	ny Partnersmp:
Signature of one General Particle.	
If Florida Limited Partnership or Limited Liabili	to Limited Partnership
Signatures of ALL General Partners.	ty Emitted Fartitetship.
Signatures of ADE Oction 1 a mers.	
All others:	
Signature of an authorized person.	
organical and assert the particular and a second parti	
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam	e:			
The name of the Lir	nited Liability Company is:			
		•		
Rethinking Safety LLC				
(Mus	contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")		
ARTICLE II - Ado	iress:			
The mailing address	and street address of the pr	incipal office of the Limited	Liability Comp	any is:
Principal Office A	<u>idress:</u>	Mailing Address:		
25216 PELICAN CRE	EK CIR #102	25216 PELICAN CREEK CIF	R #102	
Bonita Springs, FL 34	134	Bonita Springs, FL 34134		
(The Limited Liability Cor- business entity with an ac	gistered Agent, Registered opany cannot serve as its own Regist tive Florida registration.) I orida street address of the r	Office, & Registered Ager ered Agent. You must designate an in egistered agent are:	nt's Signature: idividual or another	
The name and the r		- B	Ā.,	
	Richard A. Birkhold Name		22 NOV 28 SECRETARY ALLAHASSI	-
	Name	,	IOV 28 RETARY MASSEE	
	25216 PELICAN CREEK CIR #102		28 888 888	
	Florida street address (P.O. Box NOT acceptable)			\Box
	Bonita Springs	34134 FL	PM 5: 52 OF STATE J. FLORIO	D
	City	Zip	5: 52 STATE TURNO!	
		annual comics of message for	- the above state	al limita

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager Owner / AMBR Richard A. Birkhold 25216 PELICAN CREEK CIR #102 Bonita Springs, FL 34134 (Use attachment if necessary) **ARTICLE V:** Other provisions, if any. **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 that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$817.155, F.S. Richard A. Birkhold 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)

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

ARTICLE IV-