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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:	New Filing So Division of Co				
	RKD Gro	•			
SUB.	JECT:		sulting Florida Li	mitud Comnony)	
		(Name of Re	sulung riorida Li	miled Company)	
				ation, and fees are submitted to conveny in accordance with s. 605.1045.	
Pleas	e return all corre	espondence concernin	g this matter to):	
Glenn	L. Dalton				
RKD	Group	(Contact Person)			
16320	Magnolia Bluff D	(Firm/Company) rive			
Monty	erde, FL 34756	(Address)	-		
	n@rkdgrp.com	ity, State and Zip Code)			
E-0	nail Address: (to be	e used for future annual re	port notifications)	
For fu	arther informatio	on concerning this ma	itter, please cal	1:	
Glenn	L. Dalton		314 at (409-7020	
	(Name of Contac	et Person)	(Area Co	de) (Daytime Telephone Number)	
		or the following amor a bank located in the		s processed by this office must be pay	vable in US
(\$25 fc & \$12.	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	and Certified C	ng Fees 2185.00 Filing Fees. Copy Certified Copy, and Certificate of Status	
	Mailing Addr New Filing Sc	ection		Street Address: New Filing Section	2023
	Division of Co P.O. Box 632			Division of Corporations The Centre of Tallahassee	72
	Tallahassee, F			2415 N. Monroe Street, Suite 810 Tallahassee, El. 32303	<u> </u>

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: BKD Group, LLC
(Enter Name of Other Business Entity)
Limited Liability Corporation
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
05/09/08
on
on
(Enter Name of Florida Limited Liability Company)
(Isher Hame of Frontia Ishined Isaamity 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 22nd day of February	
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name:Glenn L. Dalton	Title: Managing Partner
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name Menn L Dalton	
Printed Name elenn L. Dalton	Title: Managing Partner
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
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 Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> 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 1 - Name: The name of the Limited Liability Company	is:	
RKD Group, LLC		
(Must contain the words "Limited Liab	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
16320 Magnolia Bluff Drive	16320 Magnolia Bluff Drive	
Montverde, FL 34756	Montverde, FL 34756	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	gistered Agent. You must designate an	
Olava I. Dallar		
Glenn L. Dalton	ıme	
16320 Magnolia Bluff Drive	O Day NOT againtable)	
Montverde	P.O. Box <u>NOT</u> acceptable) 34756	
	FL	
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	l in this certificate, I hereby acc pacity. I further agree to compl te performance of my duties, ar	cept the appointment as ly with the provisions of all ad I am familiar with and
		2023
Registered Agent's S	ignature (REQUIRED)	CLI
(CONT	INUED)	2
		= = = = = = = = = = = = = = = = = = = =

ARTICLE IV-

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

'AMBR" = Authorized Membe	. (i
"MGR" = Manager AMBR	Glenn L. Dalton
111011	16320 Magnolia Bluff Drive
	Montverde, FL 34756
AMBR	Brenda Cass
	16320 Magnolia Bluff Drive
	Montverde, FL 34756
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
`	
LE V: Other provisions. if any. REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a membrase discounter is executed in accounter the second of the s	per or an authorized representative the member ordance with section 605.0203 (1) (b). Florida Statutes. I am awar a document to the Department of State constitutes a third degree
REQUIRED SIGNATURE: Signature of a membratis document is executed in accountry false information submitted in	ordance with section 605.0203 (1) (b). Florida Statutes, 1 am awar a document to the Department of State constitutes a third degree
Signature of a member This document is executed in accounty false information submitted in as provided for in s.817.155. F.S.	ordance with section 605.0203 (1) (b). Florida Statutes, I am awai

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