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(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 7 ining Officer.





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SUB	JECT: ROILLC					
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					d fees are submitted to ecordance with s. 605.1	
Pleas	se return all corr	espondence concerning	g this matter to:			
Willia	ım Russell					
		(Contact Person)		_		
RQII	_LC			_		
		(Firm/Company)				
3915	Meadow Creek E)r 		_		7 S
		(Address)				CC2
Sara	sota, FL 34233			_		23 APR 18 AM 3:3 SECRETARY PARTIES
	·	City, State and Zip Code)				Signal Co
	sell.alt@gmail.cor			_		
E-	mail Address: (to b	be used for future annual re	port notifications)			ن بند ان بند
For t	urther informati	on concerning this ma	tter, please call:			, -
Willia	ım Russell		_at (<u>410</u>) ⁴⁹¹⁻	7916	
	(Name of Conta	act Person)	(Area Code	;) (Day	ytime Telephone Number)	_
		for the following amou a bank located in the		proces	sed by this office must b	oe payable in US
(\$25) & \$10	50.00 Filing Fees for Conversion 25 for Articles ganization)	□S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Co		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 27		New Divis The C	t Address: Filing Section tion of Corporations Centre of Tallahassee N. Monroe Street, Suite	2810

Tallahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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: **RQILLC** (Enter Name of Other Business Entity) limited liability company. 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 to 09/19/2018 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: **RQILLC** (Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date:

4. If not effective on the date of filing, effer 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.)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted 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.

SECRETANT OF STATE

Signed this 11th day of April	_20 <u>_73</u>
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative: Authorized Representative: Printed Name: William Russell	Title: Member
Signature(s) on behalf of Other Business Entity: [3	See below for required signature(s)]
Signature: Assell Printed Name: William Russell	Title: Member
Signature:Printed Name:	
Signature	
Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liability Signature of one General Partner.	Officer. corporator must sign.
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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		FLORIDA LIMITED LIABIL	ATTY COMPANT		
The name of the	: Limited Liability Company	is:			
RQILLC					
	(Must contain the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")			
ARTICLE II - The mailing add		e principal office of the Limited I	iability Company is:		
Principal Offic	e Address:	Mailing Address:			
3915 Meadow Cr	reek Dr	3915 Meadow Creek Dr			
Sarasota, FL 34233		Sarasota, FL 34233			
(The Limited Liabilit business entity with	- Registered Agent, Registory Company cannot serve as its own because a ctive Florida registration.) the Florida street address of the company cannot be company to the co	ered Office, & Registered Agent Registered Agent. You must designate an indi the registered agent are:	t's Signature: ividual or another		
	William Russell		23 APR 18 SEGRETAR FALL AHASS		
	Name				
	3915 Meadow Creek Dr		SS 28 8 1		
	Florida street address (P.O. Box <u>NOT</u> acceptable)			
	Sarasota	FL 34233	်ရှင်း ယ		
	City	Zip	Em =		

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)

ARTICLE IV-

as provided for in s.817.155, F.S.

William Russell

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	Magui (D 1)			
AMBR	William Russell 3915 Meadow Creek Dr			
	Sarasota, FL 34233 Tiantian Russell 3915 Meadow Creek Dr			
AMBR				
	Sarasota, FL 34233			
				
(Use attachment if necessary)		35 √		
		SECRETA NELAHA		
TLE V: Other provisions, if any.		38.7		
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		<u> </u>		
REQUIRED SIGNATURE:		± 5,7 ⊆		
REQUIRED SIGNATURE.				
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Abolom 14 ~				

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)