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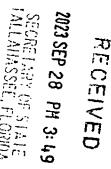
| (Requestor's Name)                       |
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| (Address)                                |
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| (City/State/Zip/Phone #)                 |
| PICK-UP WAIT MAIL                        |
|  |
| (Business Entity Name)                   |
|  |
| (Document Number)                        |
|  |
| Certified Copies Certificates of Status  |
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| Special Instructions to Filing Officer:  |
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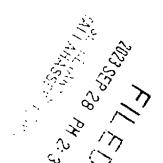
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## **COVER LETTER**

| TO: New Filing ! Division of o   | Section<br>Corporations                              |                                    |                         |  |
|--|--|------------------------------------|-------------------------|--|
| SUBJECT: Real Fin  | nancial Financial Inc                                |                                    |                         |  |
| SOBJECT.   |  | sulting Florida Li                 | imited Co               | mpany)   |
| The enclosed Articl<br>Business Entity" int  | es of Conversion, Artic<br>o a "Florida Limited L    | cles of Organiz<br>liability Comp  | ration, ar<br>any" in a | nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S. |
| Please return all cor  | respondence concernin                                | ng this matter t                   | 0:                      |  |
| Andre Reid   |  |                                    |                         |  |
|  | (Contact Person)                                     |                                    |                         |  |
|  | (Firm/Company)                                       |                                    |                         |  |
| 12498 SW Myrtle Oak  | Drive  | ·-                                 |                         |  |
|  | (Address)  |                                    |                         |  |
| Port St Lucie, FL, 349   | 87   |                                    |                         |  |
|  | City, State and Zip Code)                            |                                    | <del></del>             |  |
| andre.reid34@gmail.d   | om   |                                    |                         |  |
| E-mail Address: (to  | be used for future annual re                         | port notifications                 | .)                      |  |
| For further informat   | ion concerning this ma                               | tter, please cal                   | I:                      |  |
| Andre Reid   |  | _at ( 954                          | 6079                    | 9304   |
| (Name of Cont  | act Person)  | (Area Co                           | de) (Day                | ytime Telephone Number)  |
| Enclosed is a check<br>dollars and drawn or  | for the following amount a bank located in the       | int: (Alf check:<br>United States) | s proces:               | sed by this office must be payable in US                                     |
| ■ \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | ☐S155.00 Filing Fees<br>and Certificate of<br>Status | □\$180.00 Fili<br>and Certified C  |                         | ☐\$185.00 Filing Fees,<br>Certified Copy, and<br>Certificate of Status       |
| Mailing Add  | ress:  |                                    | Street                  | t Address:   |

New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: New Filing Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## **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:

| Real Family Financial Inc   |
|---|
| (Enter Name of Other Business Entity)   |
| 2. The "Other Business Entity" is a Corporation  (Enter entity type: Example: corporation, limited partnership, general partnership, common law or business trust, etc.   |
| First organized, formed or incorporated under the laws of   |
|   |
| January 3, 2017 (date of organization, formation or incorporation)  |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  n/a Real Family Enterprise 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.  |



| Signed this 8 day of august                            | 20_23                                 |
|--|---------------------------------------|
| Signature of Authorized Representative of Lim          | ited Liability Company:               |
| Signature of Authorized Representative:                | Title: President                      |
| Signature(s) on behalf of Other Business Entity:       | [See below for required signature(s)] |
| Signature: Printed Name: Andre Reid                    | Title: President                      |
|  |                                       |
| Signature:Printed Name:                                | Title:                                |
| Signature:   |                                       |
| Signature: Printed Name:                               | Title:                                |
|  |                                       |
| Signature:Printed Name:                                | Title:                                |
|  |                                       |
| Signature:Printed Name:                                | Title                                 |
|  |                                       |
| Signature:Printed Name:                                |                                       |
| Filited Name:  | Title:                                |
| If Florida Corporation:                                |                                       |
| Signature of Chairman, Vice Chairman, Director, or     | Officer.                              |
| If Directors or Officers have not been selected, an In | corporator must sign.                 |
| If Florida General Partnership or Limited Liabili      | ty Partnership:                       |
| Signature of one General Partner.                      | <del></del>                           |
| If Florida Limited Partnership or Limited Liabili      | ty Limited Partnership                |
| Signatures of ALL General Partners.                    | Continued Farthership.                |
| 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)                     |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Real Family Enterprise LLC  |  |
|---|--|
| (Must contain the words "Limited Liability  | y Company, "L.L.C.," or "LEC.")  |
| ARTICLE II - Address: The mailing address and street address of the pr  | incipal office of the Limited Liability Company is:  |
| Principal Office Address:   | Mailing Address:   |
| 955 S. Federal Huy Ste 502V<br>Fort Landerdale, PC, 133316  | Same   |
| business entity with an active Florida registration.)  The name and the Florida street address of the r  Andre Reid  Name                         |  |
| 955 S. Federel Florida street address (P.O  |  |
| Fort Landerdale City  | FL 333(6<br>Zip  |
| liability company at the place designated in<br>registered agent and agree to act in this capac<br>statutes relating to the proper and complete p | o accept service of process for the above stated limited<br>this certificate. I hereby accept the appointment as<br>ity. I further agree to comply with the provisions of al<br>performance of my duties, and I am familiar with and<br>gistered agent as provided for in Chapter 605, F.S., |

(CONTINUED)

2023 SEP 28 PM 2:35

Registered Agent's Signature (REQUIRED)

| <u>Title:</u> "AMBR" = Authorized Member  | Name and Address:  |
|---|--|
| "MGR" = Manager   | 1 1 0 - 1  |
| Presi dent  | Andre Kond   |
|   | 955 S Federal Hung Ste So<br>Fort Loudervlak, FC, 33/316   |
|   |  |
| <del></del>   | <del></del>  |
|   |  |
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| (Use attachment if necessary)   |  |
| •   |  |
| LE V: Other provisions, if any.   |  |
|   |  |
|   |  |
|   |  |
| REQUIRED SIGNATURE:   | 4  |
|   |  |
|   |  |
|   | an authorized representative of a member   |
|   | with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree for |
|   |  |
| any false information submitted in a docur  |  |
| any false information submitted in a docur as provided for in s.817,155, F.S.  Andre Reid | ped or printed name of signee Filing Fees  |

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

• • •

ARTICLE IV-