L23000554500

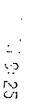
(Requestor's Name)
(Nequestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
openia. Indications to 1 ming emoci.





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COVER LETTER

TO:	New Filing S Division of C				
SHR	JECT: Revolution	on Patch Inc.			
.50130	, n.e. r	(Name of Res	sulting Florida l	Limited Cor	npany)
			•		nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concernin	g this matter	to:	
Cristia	an Alcantara Gon	zalez			
		(Contact Person)			
		(Firm/Company)			
6605	N 50th St Apt A	/ 4 3 d			
Tama	a El 22610	(Address)			
	a. FL 33610	City. State and Zip Code)			
revolu	ر) rtionpatchinc@gr	•			
		e used for future annual re	port notification	<u></u> 1s)	
		on concerning this ma	•		
	an Alcantara Gon	_	813		7-7176
	(Name of Conta		at ()	vtime Telephone Number)
	sed is a check t	,	int: (All chec	ks proces	sed by this office must be payable in US
(\$25 fc & \$12:	60.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fr and Certified		\$185.00 Filing Fees. Certified Copy. and Certificate of Status
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, 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: Revolution Patch 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
(Enter state, or it a non-U.S. entity, the name of the country)
05/30/2023
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Revolution Patch 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.)
<u>Note:</u> 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 27 day of November	20
Signature of Authorized Representative	e of Limited Liability Company:
Signature of Authorized Representative	Price for
Signature of Authorized Representative: X Printed Name: Cristian Alcantara Gonzalez	Title: MGR
Signature(s) on behalf of Other Business	Entity: [See below for required signature(s)]
Signature: X PAGE For	
Printed Name: Cristian Alcantara Gonzalez	Title: President
Signature:	Title:
Printed Name:	Little:
Signature:	
Printed Name:	Title:
Signature:	Title:
rrinted Name:	Title:
Signature:	
Printed Name:	Title:
C'	
Printed Name:	Title:
Timed Name.	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Dir	
If Directors or Officers have not been select	ed, an Incorporator must sign.
If Florida General Partnership or Limite	d Liability Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	d Liability Limited Partnership:
Signatures of ALL General Farmers.	
All others:	
Signature of an authorized person.	
Face	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organi	
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Revolution Patch LL	.C			
(Mu	ist contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Ad The mailing addres		he principal office of the Limited Liability Compa		
Principal Office A	Address:	Mailing Address:		
6605 N 50th St Apt A		6605 N 50th St Apt A		
6605 N 50th St Apt /	A	6605 N 50th St Apt A		
ARTICLE III - R The Limited Liability Cobusiness entity with an	egistered Agent, Regist ompany cannot serve as its own active Florida registration.)	Tampa, FL 33610 tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another		
ARTICLE III - R (The Limited Liability Cobusiness entity with an a	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of	Tampa, FL 33610 tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:		
ARTICLE III - R (The Limited Liability Cobusiness entity with an	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of Cristian Alcantara Gonza	Tampa, FL 33610 tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:		
ARTICLE III - R (The Limited Liability Cobusiness entity with an	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of Cristian Alcantara Gonza	Tampa, FL 33610 tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:		
ARTICLE III - R (The Limited Liability Cobusiness entity with an a	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of Cristian Alcantara Gonza	Tampa, FL 33610 tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:		
ARTICLE III - R (The Limited Liability Cobusiness entity with an a	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of Cristian Alcantara Gonza	Tampa, FL 33610 tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: lez Name		

ited f all ndaccept the obligations of my position as registered agent as provided for in Chapter 605. F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

	D	TI	C^{1}	F	11	1_
•	и					

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR - Manager	Cristian Alcantara Gonzalez
- India	6605 N 50th St Apt A
	Tampa, FL 33610
	1011pd, 12 00010
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
LE V: Other provisions, if any,	
DEAHIDED CIANT TUDE.	
REQUIRED SIGNATURE:	
X C. Alcantara	
1 Contake	
Signature of a member o	or an authorized representative of a member
	ice with section 605.0203 (1) (b). Florida Statutes, I am aware
any talse information submitted in a doc	cument to the Department of State constitutes a third degree fe
as provided for in s.817.155, F.S.	
Cristian Alcantara Gonzalez	
1	Typed or printed name of signee
	Filing Fees

S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)