# L24000 213110

(Requestor's Name)
( industrial and indu
(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:
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#### **COVER LETTER**

TO: New Fili Division	ng Section of Corporations			
SUBJECT: RGI	GATEHOUSE CAPITAL I	LLC		
		Resulting Florida Lim	nited Co	Ompany)
	icles of Conversion, Ar into a "Florida Limited	ticles of Organiza Liability Compan	tion, a	and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all	correspondence concern	ing this matter to:		
BARNETT RUTTE	NBERG, ESQ			
	(Contact Person)			
924 HIDOO	(Firm/Company)		-	
824 JUDSON AVE		<del></del>		
HIGHLAND PARK,	(Address)	·	_	
b.ruttenberg@como	(City, State and Zip Code)		-	
E-mail Address: (	o be used for future annual r	eport notifications)	-	
For further inform	ation concerning this ma	atter, please call:		
BARNETT RUTTEN	BERG ntact Person)	at ( <u>224</u>	) <u>456-7</u>	
Enclosed is a check	•		(Day rocess	rtime Telephone Number) sed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)		□\$180.00 Filing I and Certified Copy	Fees /	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Ad New Filing Division of P.O. Box 63 Tallahassee,	Section Corporations 27	א ר ד 2	New F Division The Co 415 N	Address: iling Section on of Corporations entre of Tallahassee I. Monroe Street, Suite 810

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:
(Enter Name of Other Business Entity)
2 TH WO
(Enter entity type. Example: corporation limited association limited association)
First organized, formed or incorporated under the laws of
01/10/2024: (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(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 _ April	20_ <b>ZY</b>
Signature of Authorized Representative of Lin	
Signature of Authorized Representative: Printed Name: DAVID RUTTENBERG	
Signature(s) on behalf of Other Business Entity:	(See helow for required signature (
Signature:Signature:	it is required signature(s)
Printed Name: VALTO Ruttenborn	Title: Manager
Signature: Printed Name:	Title:
Signature:	True.
Signature:  Printed Name:	Title:
Signature:Printed Name:	
Signature:	TRIC
Signotype	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir If Florida General Partnership or Limited Liabil Signature of one General Partner.	Officer. acorporator must sign.
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ity Limited Partnership:
All others: Signature of an authorized person.	
Fecs:	
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 I - Name: The name of the Limited Liability Company	
and Similed Liability Company	
	is:
	•
RGI GATEHOUSE CAPITAL LLC	
(Must contain the words we	<del></del>
(Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address.	
The mailing address and street add	principal office of the Limited Liability Company is:
and street address of the	principal office of the Limited Liability Comment
Principal Office Address:	is:
- Address:	Mailing Address:
354 EISENHOWER PARKWAY	
SUITE 2775	SAME
LIVINGSTON, NJ 0709	····
2.7114GSTON, NJ 0709	
A DOWN OF T	
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own Registered business entity with an active Florida.	ed Office & D
husiness entire with	istered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.)	ostered Agent. Fou must designate an individual or another
The name and the Florida street	
The name and the Florida street address of the	registered agent are:
DAVID DUTTENDED S	
DAVID RUTTENBERG	
DAVID RUTTENBERG Nam	ne
Nam	ne e
Nam 4092 BOCAIRE BLVD	
Nam 4092 BOCAIRE BLVD	
Nam 4092 BOCAIRE BLVD Florida street address (P.C	). Box <u>NOT</u> acceptable)
Nam 4092 BOCAIRE BLVD	). Box <u>NOT</u> acceptable)
Nam 4092 BOCAIRE BLVD Florida street address (P.C BOCA RATON	). Box <u>NOT</u> acceptable) FL <sup>33487</sup>
Nam 4092 BOCAIRE BLVD Florida street address (P.C BOCA RATON City	D. Box <u>NOT</u> acceptable)  FL 33487  Zip
Nam  4092 BOCAIRE BLVD  Florida street address (P.C  BOCA RATON  City  Having been named as recistered.	D. Box <u>NOT</u> acceptable)  FL 33487  Zip
A092 BOCAIRE BLVD  Florida street address (P.C.  BOCA RATON  City  Having been named as registered agent and to liability company at the place.	D. Box NOT acceptable)  FL 33487  Zip  D accept service of process for the above stated limits.
Adoption Name Name Name Name Name Name Name Name	D. Box NOT acceptable)  FL 33487  Zip  D accept service of process for the above stated limited this certificate, I hereby accept the appointment of
Nam  4092 BOCAIRE BLVD  Florida street address (P.C.  BOCA RATON  City  Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and activities.	D. Box NOT acceptable)  FL 33487  Zip  Discrept service of process for the above stated limited at this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all
Nam  4092 BOCAIRE BLVD  Florida street address (P.C.  BOCA RATON  City  Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and activities.	D. Box NOT acceptable)  FL 33487  Zip  Discrept service of process for the above stated limited at this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all
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Nam  4092 BOCAIRE BLVD  Florida street address (P.C.  BOCA RATON  City  Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and activities.	D. Box NOT acceptable)  FL 33487  Zip  Discrept service of process for the above stated limited at this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and distered agent as provided for in Chapter 605, F.S

(CONTINUED)

#### ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	DAVID RUTTENBERG
	4092 BOCAIRE BLVD
	BOCA RATON, FL 33487
MGR	
MGK	GERALD NUDO
	30 N. MICHIGAN AVE, STE 2100
	CHICAGO, IL 60602
(Use attachment if necessary)	
t inccessary)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	4
Signature of a member or on	a authorized representative of a momba-
Signature of a member or an	a authorized representative of a member ith section 605.0203 (!) (b), Florida Statutes. I am aware that to the Department of State constitutes a third degree felo
Signature of a member or an	a authorized representative of a member ith section 605.0203 (1) (b), Florida Statutes. I am aware that to the Department of State constitutes a third degree fellows.
Signature of a member or an This document is executed in accordance wi any false information submitted in a docume as provided for in s.817.155, F.S.  DAVID RUTTENBERG	a authorized representative of a member ith section 605.0203 (1) (b), Florida Statutes. I am aware that to the Department of State constitutes a third degree felt do or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)