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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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12/21/24--01:23--001 \*\*50.50

04/25/24--01:58--001 \*\*97.50

## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: ROMAR VENTURE PARTNERS, LLC  
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

RAUL GONZALEZ, Registered Agent  
(Contact Person)

ROMAR VENTURE PARTNERS LLC  
(Firm/Company)

1515 TEDDINGTON STREET  
(Address)

DELAND, FL 32720  
(City, State and Zip Code)

rg1154662@gmail.com  
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

RAUL GONZALEZ at ( 386 ) 366-4473  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☐ \$150.00 Filing Fees  
( \$25 for Conversion  
& \$125 for Articles  
of Organization )

☐ \$155.00 Filing Fees  
and Certificate of  
Status

☐ \$180.00 Filing Fees  
and Certified Copy

☐ \$185.00 Filing Fees,  
Certified Copy, and  
Certificate of Status

**Mailing 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

\* Please Refer TO your NO. W24000044029 , ENCLOSED.  
AMOUNT DUE IS \$97.50



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 19, 2024

*Rec'd 3/28/24 (rs)*

RAUL GONZALEZ  
1515 TEDDINGTON ST  
DELAND, FL 32720 US

SUBJECT: ROMAR VENTURE PARTNERS  
Ref. Number: W24000044029

There is a fee of \$97.50 due.

You have sent in the incorrect conversion form please fill out and return the attached form along with a check for the requested ammuont due.,

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable. Please amend your document accordingly.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO  
Regulatory Specialist II  
New Filing Section

Letter Number: 824A00005892

**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:

ROMAR VENTURE PARTNERS, LTD.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LIMITED PARTNERSHIP

(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of FLORIDA

(Enter state, or if a non-U.S. entity, the name of the country)

on AUGUST 15, 2023

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

ROMAR VENTURE PARTNERS, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: APRIL 18, 2024.

**(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 18<sup>TH</sup> day of APRIL 20 24.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: Raul Gonzalez  
Printed Name: RAUL GONZALEZ Title: AUTHORIZED MEMBER

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: Raul Gonzalez  
Printed Name: RAUL GONZALEZ Title: AUTHORIZED MEMBER

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**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

### ARTICLE I - Name:

The name of the Limited Liability Company is:

ROMAR VENTURE PARTNERS, LLC

(Must contain the words "Limited Liability Company," "LLC," or "L.L.C.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

1515 TEDDINGTON ST.  
DELAND, FL 32720

#### Mailing Address:

1515 TEDDINGTON ST.  
DELAND, FL 32720

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

RAUL GONZALEZ

Name

1515 TEDDINGTON STREET

Florida street address (P.O. Box **NOT** acceptable)

DELAND

City

FL

32720

Zip

*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.,*

Raul Gonzalez

Registered Agent's Signature (REQUIRED)

(CONTINUED)

STATE OF FLORIDA

COUNTY OF VOLUSIA

On this date, April 18, 2024, before me a notary public, the undersigned authority, the following personally appeared: Braul Gonzalez

Incorporators:

known to me or have satisfactorily proven that they are the Incorporators of the Articles of Incorporation, that they signed the aforementioned document as such, and that the statements contained therein are true and correct.

**IN WITNESS WHEREOF**, I have hereunto set my hand and seal the day and year as written above.

*Melissa Lynn Anderson*

(Printed Name of Notary Public) Melissa Lynn Anderson



My Commission Expires: Jan 22, 2025

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

AMBR

**Name and Address:**

RAUL GONZALEZ

1515 TEDDINGTON ST.

DELAND, FL 32720

PEDRO RODRIGUEZ

4930 S DUQUESNE ST

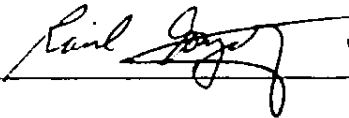
AURORA, CO 80016

(Use attachment if necessary)

**ARTICLE V:** Other provisions, if any.

N/A

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

RAUL GONZALEZ

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)**

2024