# L24000486850

(Requestor's Name)
(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:
W24000107895

Office Use Only



100433356361

07/22/24--01024--013 \*\*185.00

STORE TARY OF STATE SALLAHASSEE, FLORIDA



July 29, 2024

RHYAN FINCH 6330 HOLLYWOOD BLVD SARASOTA, FL 34231 US

SUBJECT: 1ST CLASS PROPERTIES, LLC

Ref. Number: W24000107895

2024 AUG 19 PH 3: 45

We have received your document for and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L23000147388.

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

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 924A00016715

2024 £US 19 PM 3: 59

11

### COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: 1st Class Properties. LLC		
(Nan	ne of Resulting Florida Limite	d Company)
The enclosed Articles of Conversio Business Entity" into a "Florida Lin	n, Articles of Organizatio nited Liability Company"	n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all correspondence co	ncerning this matter to:	
Ahyan Finch		
(Contact Person	on)	
1st Class Properties, LLC		
(Firm/Compa	ny)	
6330 Hollywood Blvd		
(Address)		
Sarasota, FL 34231		
(City, State and Z	ip Code)	•
owners@1stclassagents.com		
E-mail Address: (to be used for future	: annual report notifications)	
For further information concerning		
Rhyart Finch	at ( <sup>251</sup>	) 978-0446 (Daytime Telephone Number)
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follow dollars and drawn on a bank locate	ing amount: (All checks ped in the United States)	processed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Fi and Certificat Status	ling Fees	
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

#### **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:    St () USS Proper H S LLC  (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Single - Mumber Limited Liability (ompan (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
RF Properties, LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 1205014 1715 14  (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.
5. The "Converted or Other Rusiness Entity" has agreed to now any members having appraisal rights the amount to

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.

2024 JUL 22 AM 4: 15

Signed this 12th day of August	20 <u> 24</u>
Signature of Authorized Representative of Lim	
Signature of Authorized Representative:  Printed Name: Phych Finch	Title: (EO
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Mhyan Finch	
Printed Name: Knyan Finch	Title: (EO
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty 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 ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Comp	·
(Must contain the words "Limited	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address or	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
(0330 HOllywood Blud SCHUSOFA, FL 34231	Sarasota, FL 34231
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its over business entity with an active Florida registration.)  The name and the Florida street address of the server and the server	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another
	-
	Name
6330 HO	llywood Blud
	ss (P.O. Box NOT acceptable)
Sarasota	FI 34231
City	FL 34231 Zip
liability company at the place design registered agent and agree to act in this statutes relating to the proper and con	t and to accept service of process for the above stated limited nated in this certificate, I hereby accept the appointment as a capacity. I further agree to comply with the provisions of all applete performance of my duties, and I am familiar with and in as registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

A	DT	$\Gamma$	E	IV
А	RT	ıcı	JL.	1 V -

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	•
AMBR	_ Rhyan Finch
	10330 Hollywood Blud
	SULUSOFU, FL 34231
	•
<del></del>	
	<del>-</del>
	<del></del>
(Use attachment if necessary)	
(Ose attachment if necessary)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	<u></u>
	M
Signature of a membe This document is executed in accordany false information submitted in a	r or an authorized representative of a member dance with section 605.0203 (1) (b), Florida Statutes. I am aware document to the Department of State constitutes a third degree for
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