# 124000531191

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Oity/Otate/Zip// None #)
PICK-UP WAIT MAIL
(Business Entity Name)
<b>,</b> ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



000441413720

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 862120 81491A AUTHORIZATION : COST LIMIT : \$ 185 ORDER DATE: December 27, 2024 ORDER TIME : 10:48 AM ORDER NO. : 862120-005 CUSTOMER NO: 81491A DOMESTIC AMENDMENT FILING NAME: RAS INVESTMENT PROPERTIES, INC EFFECTIVE DATE: \_ ARTICLES OF AMENDMENT CONVESSION (INCORP. RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX\_\_\_\_ CERTIFIED COPY \_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Amanda Miller -- EXT#

EXAMINER'S INITIALS: \_\_

## **COVER LETTER**

TO:	New Filing Division of	Section Corporations						
SHRI		AS INVESTMENT PRO	PERTIES, LLO	C				
SODA	EC1		sulting Florida Lin		mpany)	_ <del>_</del>		
		les of Conversion, Artic to a "Florida Limited L	_					Other
Please	e return all co	rrespondence concernin	g this matter to	:			297 <b>1</b> DEC	, i
	Jordan Jo	hansen					હુ	
		(Contact Person)				Ċ		
	Jones Fo	oster P.A.				-	<u> </u>	
		(Firm/Company)				1 - 1	5: 4	~
	505 S. FL	agler Drive, Suite 1100				:	7	
		(Address)		_				
	Waat Dale	n Beach, FL 33401						
	west ram	(City, State and Zip Code)		<del></del>				
	cpmd@att	net						
E-r		be used for future annual re	port notifications)	<u> </u>				
For fu	ırther informa	ntion concerning this ma	tter, please call	:				
Jord	lan Johansen		at (_561	,	50-0432			
	(Name of Cor	ntact Person)	(Area Cod	le) (Da	sytime Telephone Numb	er)		
Enclo dollar	sed is a check s and drawn o	k for the following amount on a bank located in the	int: (All checks United States)	proces	ssed by this office m	iust be pay	able in	US
(\$25 fc & \$12:	50.00 Filing Fees or Conversion 5 for Articles anization)	s □\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filinand Certified C	_	S185.00 Filing Fe Certified Copy, and Certificate of Status	es.		
	Mailing Ad New Filing Division of P.O. Box 6: Tallahassee	Section Corporations 327		New Divis The	et Address: Filing Section sion of Corporations Centre of Tallahasse N. Monroe Street, hassee, FL 32303	ce		

### **Articles of Conversion**

For

## "Other Business Entity"

Into

### Florida Limited Liability Company

"Other Business Entity" into a Florida Limited Liability Company in accordance with			_
Statutes.	1 3.000.		TOTICE
		202\$	
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles RAS INVESTMENT PROPERTIES, INC.	of Cor	ivērsioi	n is: g
(Enter Name of Other Business Entity)	-	C)	
	( )		
2. The "Other Business Entity" is a <u>Corporation</u>		<u></u>	
(Enter entity type. Example: corporation, limited partnership, general partnership, common	law or bi	usmess ti	rust,.etc.)
rs:	 L	47	
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the no	ame of th	ne countr	_ ~)
(Effet State, of it a non-o.s. citity, the is	anic or n	ic count	31
on 05/01/2014			
(date of organization, formation or incorporation)			
(date of organization, formation of interpretation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Articl	es of O	rganiz	ation:
RAS INVESTMENT PROPERTIES, LLC			
(Enter Name of Florida Limited Liability Company)			
4. If not effective on the date of filing, enter the effective date: 12/31/2024			
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90	calend	ar day	s 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 b	e 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 appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	l rights	the ame	ount to

Signed this day ofDecember	20_24	
Signature of Authorized Representative of Limit	ted Liability.Company:	
Signature of Authorized Representative:	- Jel. Siegland Fille: Manager	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
Signature: Wenn-hold Signature: Glenn Signature	)	
	_ Title: <u>President</u>	
Signature:Printed Name:	202 <b>4</b> DEC	
Signature:Printed Name:	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·	
Signature:Printed Name:		`.
Printed Name:	_ Title:	
Signature:Printed Name:		
Printed Name:	_ Title:	
Signature:Printed Name:		
Printed Name:	_ Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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

RAS INVEST	MENT PROPERTIES, LLO		
(M	lust contain the words "Limited Liabi	ity Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ddress:		20
The mailing addre	ess and street address of the	orincipal office of the Limited	' ]
Principal Office	Address:	Mailing Address:	)EC 30
8691 Man O W	ar Road	8691 Man O War Road	=
Palm Beach Ga	rdens, FL 33418	Palm Beach Gardens, FI	233418 = 3 · 3 · 3
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registere Company cannot serve as its own Registration.)	ed Office, & Registered Age stered Agent. You must designate an in	nt's Signature:
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registere Company cannot serve as its own Registration.)  Florida street address of the	ed Office, & Registered Age stered Agent. You must designate an in	nt's Signature:
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registere Company cannot serve as its own Registration.)	ed Office, & Registered Age stered Agent. You must designate an in registered agent are:	nt's Signature:
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registered Lompany cannot serve as its own Registered active Florida registration.)  Florida street address of the Glenn Siegler  Nar  8691 Man O War Road	rd Office, & Registered Age stered Agent. You must designate an in registered agent are:	nt's Signature:
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registered Lompany cannot serve as its own Registered active Florida registration.)  Florida street address of the Glenn Siegler  Nar  8691 Man O War Road	ed Office, & Registered Age stered Agent. You must designate an in registered agent are:	nt's Signature:
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registered Lompany cannot serve as its own Registered active Florida registration.)  Florida street address of the Glenn Siegler  Nar  8691 Man O War Road	rd Office, & Registered Age stered Agent. You must designate an in registered agent are:	nt's Signature:
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registered Lompany cannot serve as its own Registered active Florida registration.)  Florida street address of the Glenn Siegler  Nar  8691 Man O War Road  Florida street address (P.	red Office, & Registered Age stered Agent. You must designate an in registered agent are:  ne  O. Box NOT acceptable)	nt's Signature:

(CONTINUED)

accept the obligations of my position as registered agent as provided for in Chapter 605. F.S..

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

"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Glenn Siegler
	8691 Man O War Road
	Palm Beach Gardens, FL 33418
	O Principal Control of the Control o
<del></del>	
	<u>;</u>
	-
	7
(Use attachment if necessary)	
(Use attachment if necessary)  CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	Li Q. Co.
CLE V: Other provisions, if any.	Lighton.
REQUIRED SIGNATURE:	or an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance.	and see the see that the see th
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordar any false information submitted in a do as provided for in s.817.155, F.S.  Glenn Siegler, Tr	or an authorized representative of a member nee with section 605.0203 (1) (b). Florida Statutes. I am aware ocument to the Department of State constitutes a third degree for the constitutes.
REQUIRED SIGNATURE:  Signature of a member	or an authorized representative of a member more with section 605.0203 (1) (b). Florida Statutes. I am aware ocument to the Department of State constitutes a third degree for