# P17000008926

(	Requestor's Name)
	Address)
	Address)
,	Audiessy
(	City/State/Zip/Phone #)
_	
PICK-UP	WAIT MAIL
	Business Entity Name)
,	Susiness Entity Name,
(	(Document Number)
Certified Copies	Certificates of Status
	· · · · · · · · · · · · · · · · · · ·
Special Instructions	to Filing Officer:
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Office Use Only



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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 10, 2017

ANTHONY LAMARCA 4011 N FEDERAL HWY FT. LAUDERDALE, FL 33308

SUBJECT: RAL, CO.

Ref. Number: W17000001927

We have received your document for RAL, CO. and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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 .

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Matthew T Moon Regulatory Specialist II

Letter Number: 817A00000526

www.sunbiz.org

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#### **COVER LETTER**

. Charter Section

TO:

Division of Co	rporations					
SUBJECT: RAL Science	es, Inc.					
SUBJECT.	Name of	Resulting Florid	a Profit	Corporation		
	e of Conversion, Article Profit Corporation" in ac	•	-	ees are submitted to convert an "C	)ther Busin	ness
Please return all corresp	pondence concerning this	s matter to:				
Anthony LaMarca						
	Contact Person	, ,				
RAL Sciences, Inc.					17	
	Firm/Company	H. C.	_		1.2 Fo 40	
4011 North Federal Hwy						
	Address		_		]; 5	
Fort Lauderdale, FL 3330	8				30	( ) ( )
	City, State and Zip Cod	e				
director@therafirst.com						
E-mail address: (t	o be used for future anni	ual report notific	ation)			
For further information	concerning this matter,	please call:				
Anthony LaMarca		954 at (	564-4	222		
Name of Co	ontact Person		ode and	l Daytime Telephone Number		
Enclosed is a check for	the following amount:					
☐ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filir and Certified C		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	Circle		New F Division P. O. F	ilings Section on of Corporations Box 6327 assee, FL 32314		

## Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business	Entity" immediately prior to the filing of this Certificate of Conversion is:
RAL, LLC	20000009955
	Enter Name of Other Business Entity
	imited liability company
(Enter entity t	ype. Example: limited liability company, limited partnership, tership, common law or business trust, etc.)
first organized, formed or incorporate	Florida Florida
(Enter	state, or if a non-U.S. entity, the name of the country)
August 18, 2000 on	
Enter date "Oth	ner Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Buorganized, formed or incorporated:	usiness Entity" was changed, the state or country under the laws of which it is now
4. The name of the Florida Profit Co	rporation as set forth in the attached Articles of Incorporation:
RAL Sciences, Inc.	
	Enter Name of Florida Profit Corporation
(The effective date: 1) cannot be p	g, enter the effective date:  rior to nor more than 90 days after the date this document is filed by the Florid:  be the same as the effective date listed in the attached Articles of Incorporation

Signed thisday of	, 20		
Required Signature for Florida Profit Corporation:			
Signature of Chairman, Vice Chairman, Director, Office Incorporator:  Printed Name: Anthony LaMarca  Title: Presiden	er, or, if Directors or Officers have not been selected,	an	
Required Signature(s) on behalf of Other Business E	intity: [See below for required signature(s).]		
Signature: The Duorue			
Printed Name:	Title: Manager		
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:			~;
Signature:			
Printed Name:	_ Title:	(2) (2)	
Signature:			
Printed Name:		i6: 30	
Signature:			
Printed Name:			
If Florida General Partnership or Limited Liability I Signature of one General Partner.	Partnership:		
If Florida Limited Partnership or Limited Liability I Signatures of ALL General Partners.	Limited Partnership:		
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.			
All others: Signature of an authorized person.			
Fees:			

Page 2 of 2

\$35.00

\$70.00

\$8.75 (Optional) \$8.75 (Optional)

Certificate of Conversion:

Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:

### ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
4011 North Federal Hwy	
Fort Lauderdale, FL 33308	***************************************
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is Research	5: F-2
ARTICLE IV SHARES	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE IV SHARES	DIRECTORS
ARTICLE IV SHARES The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR  Anthony LaMarca President	
ARTICLE IV SHARES The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR  Name and Title:  4011 North Federal Hwy	DIRECTORS  Name and Title: Address:
ARTICLE IV SHARES The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR  Name and Title:  Anthony LaMarca, President  4011 North Federal Hwy  Fort Lauderdale, FL 33308	DIRECTORS  Name and Title:  Address:
ARTICLE IV SHARES The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR  Name and Title:  Anthony LaMarca, President  4011 North Federal Hwy  Fort Lauderdale, FL 33308	DIRECTORS  Name and Title:  Address:  Name and Title:
ARTICLE IV SHARES The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR  Name and Title:  Anthony LaMarca, President  4011 North Federal Hwy  Fort Lauderdale, FL 33308  Name and Title:  Address:  Address:	DIRECTORS  Name and Title:  Address:  Name and Title:  Address:
ARTICLE IV SHARES The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR  Name and Title:  Anthony LaMarca, President  4011 North Federal Hwy  Fort Lauderdale, FL 33308  Name and Title:  Address:	DIRECTORS  Name and Title:  Address:  Name and Title:  Address:  Name and Title:

	E VI REGISTERED AGENT and Florida street address (P.O. Box No	OT acceptable) of the registered agent is:	
Name:	Anthony LaMarca		
Address:	4011 North Federal Hwy	Comm (3.7) 	, ,
	Fort Lauderdale, FL 33308	(3) (2)	2.552
ARTICLE The name	and address of the Incorporator is:	- 	-
Name:	Anthony LaMarca	<u> </u>	
Address:	4011 North Federal Hwy		
	Fort Lauderdale, FL 33308		
		**************************************	gnated in
	Required Signature/Registered Agent		
		ted herein are true. I am aware that any false information subm aird degree felony as provided for in s.817.155, F.S.	itted in a
(	Required Signature/Incorporator	Jan 18, 2017	>