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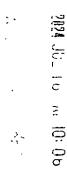
(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
<u>_</u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consideration of Filling Officers
Special Instructions to Filing Officer:

Office Use Only



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07/18/24--01016--020 **155.00



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 Article RGN 2022 A ONE LLC	s of Cor	version is:
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a		
(Enter entity type. Example: corporation, limited partnership, general partnership, commor	ı law or bı	usiness trust, etc.
First organized, formed or incorporated under the laws of		
(Enter state, or if a non-U.S. entity, the i	name of th	e country)
(date of organization, formation or incorporation)		
3. The name of the Florida Limited Liability Company as set forth in the attached Artic RGN 2022 A ONE LLC	les of O	rganization:
(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 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 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.		
 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 tl	he amount to
	.· ·	2024
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		21

•	•
Signed this day of	20_24
Signature of Authorized Representative of Lin	uited Liability Company:
Signature of Authorized Representative:	Title: MANAGER
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: DANLO RUTTENBERS	
Printed Name: DAVID RUTTENBERG	Title: MANAGER
Signature:	
Signature: Printed Name:	Title:
Signature:	
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 If Directors or Officers have not been selected, an In	Officer
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> 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)

\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABII	LITY CO	MPANY
ARTICLE I - Name:			
The name of the Limited Liability Company is:			
, , ,			
RGN 2022 A ONE LLC			
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of the pri	ncipal office of the Limited L	.iability Co	ompany is:
Principal Office Address:	Mailing Address:		
354 EISENHOWER PARKWAY	SAME		
SUITE 2775 LIVINGSTON, NJ 0709			
21VIIVGS 1 ON, INJ 10709			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent' red Agent. You must designate an indiv	's Signatu vidual or anotl	re: her
The name and the Florida street address of the re	gistered agent are:		
DAVID RUTTENBERG			
Name			
4092 BOCAIRE BLVD			
Florida street address (P.O.	Box NOT acceptable)		
BOCA RATON	FL ³³⁴⁸⁷		
City	Zip		
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regis	his certificate, I hereby accept v. I further agree to comply w rformance of my duties, and I	the appoint the proving the the proving the the proving the the proving the	ntment as visions of all
	11	\$ C	282 4 Ui
Registered Agent's Signat	ture (REQUIRED)		Ú.
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(CONTINU	ED)		25 -
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The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager MGR	DAVID RUTTENBERG 4092 BOCAIRE BLVD BOCA RATON, FL 33487		_ _
MGR	GERALD NUDO 30 N. MICHIGAN AVE, STE 2100 CHICAGO, IL 60602		_ _ _ _
			- -
			- -
(Use attachment if necessary) ARTICLE V: Other provisions, if any.			
- Cother provisions, if any.		3-	20
		-	- A-
REQUIRED SIGNATURE:			JU: Ito
	<u> </u>		A . IO: 06
Signature of a member or ar This document is executed in accordance w any false information submitted in a docume as provided for in s.817.155, F.S.	n authorized representative of a memb ith section 605.0203 (1) (b), Florida Statutes. I are ent to the Department of State constitutes a third of	er n aware t legree fel	_
DAVID RUTTENBERG			
Туре	d or printed name of signee		

Filing Fees

\$125.00 Filing Fee for Articles of Organization or