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December 9, 2024

RONALD L. SIEGELM ESQ.

2255 GLADES ROAD SUITE 414E BOCA RATON, FL 33431 US

SUBJECT: 4618 VENTURES, LLC Ref. Number: W24000161134

We have received your document for 4618 VENTURES, LLC and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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 H Hitchcock

Letter Number: 824A00026614

## COVER LETTER

TO:	New Filing Section Division of Corporations			1.
erin I	ECT: 4618 VENTURES, LLC			
3010		ulting Florida Lim	ited Con	npany)
The en Busin	nclosed Articles of Conversion, Articless Entity" into a "Florida Limited Lia	es of Organizat ability Compan	tion, an	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all correspondence concerning	this matter to:		
RONA	ALD L. SIEGEL, ESQ.			
	(Contact Person)		_	
BRINE	KLEY MORGAN			
	(Firm/Company)		_	
2255	GLADES ROAD SUITE 414E			
	(Address)		_	
BOCA	RATON FL 33431			
	(City, State and Zip Code)		_	
ronald	i.siegel@brinkleymorgan.com			
E-1	mail Address: (to be used for future annual re	port notifications)	_	
For fi	urther information concerning this mat	tter, please call	:	
RONA	ALD L. SIEGEL, ESQ.	_at (	) <sup>241-3</sup>	3113
	(Name of Contact Person)		c) (Day	vtime Telephone Number)
Enclo dollar	osed is a check for the following amours and drawn on a bank located in the	nt: (All checks United States)	process	sed by this office must be payable in US
(\$25 fo & \$12	50.00 Filing Fees or Conversion and Certificate of 5 for Articles Status	S180.00 Filin and Certified Co		□\$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		New Divis The (	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

### **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: 4618 VENTURES, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
06/28/2022 on .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
4618 VENTURES, LLC
(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 calendar days after the date this document is filed by the Florida Department of State.)
<u>Note:</u> 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 <u>1st</u> day of <u>November</u>	20_24
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:   Printed Name: MARY JO ROBIN SPRENGER	Or Sounces OTitle: MANAGER
Signature(s) on behalf of Other Business Entity:	- • • • • • • • • • • • • • • • • • • •
Signature: Mary R. Sprenger	Title: Manager
Signature:Printed Name:	Tr'41
Frimed Name.	Inte:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Tiala
rimed Mane.	
Signature:	
Printed Name:	Title:
0:	
Signature:	That
Printed Name:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florido Comend Donas analis and Smith de Labert	A. D. A A
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others:	
Signature of an authorized person.	
Fces:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

4618 VENTURES, LLC	
	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
5350 SUGARCANE LANE	6350 SUGARCANE LANE
LAKE WORTH, FL 33449-5832	LAKE WORTH, FL 33449-5832
ARTICLE III - Registered Agent Regi	stered Office. & Registered Agent's Signature:
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another of the registered agent are:
	n Registered Agent. You must designate an individual or another of the registered agent are:
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)  The name and the Florida street address of	n Registered Agent. You must designate an individual or another of the registered agent are:
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)  The name and the Florida street address of	n Registered Agent. You must designate an individual or another of the registered agent are: SQ. Name
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)  The name and the Florida street address of RONALD L. SIEGEL, E	n Registered Agent. You must designate an individual or another of the registered agent are: SQ. Name
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)  The name and the Florida street address of RONALD L. SIEGEL, E	n Registered Agent. You must designate an individual or another of the registered agent are: SQ. Name SUITE 414E

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

# ARTICLE IV-

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

MARY JO ROBIN SPRENGER 6350 SUGARCANE LANE LAKE WORTH, FL 33449-5832	<del></del>
LAKE WORTH, FL 33449-5832	
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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.

MARY JO ROBIN SPRENGER

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)