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(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
(City/State)21p/1 Horie #/
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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DATE:

01/26/2024

NAME: AJX HOLDINGS, LLC

TYPE OF FILING: CONVERSION

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Division of	Section Corporations		
SUBJECT: AJX Ho	ldings, LLC		
	· · · · · · · · · · · · · · · · · · ·	a Limited Liability Compar	ny
The enclosed Articl Limited Liability Cos.605.1045, F.S.	cs of Conversion and iompany" into an "Othe	fee(s) are submitted to er Business Entity" in a	convert a Florida accordance with
Please return all cor	respondence concerni	ng this matter to:	
Michael G. Schinner			
	Contact Person		
Schinner & Shain, LLP			
	Firm/Company		
96 Jessie St			
	Address		
San Francisco, CA 9411	05		
	City, State and Zip Code		
Schinner@Schinner.com			
	be used for future annual	report patitionion)	
		•	
For further informat	ion concerning this ma	itter, please call:	
Michael G. Schinner		at (415) 369	-9050
Name of Contact I	erson		time Telephone Number
Enclosed is a check	for the following amo	unt:	
\$25.00) Filing Fee	S30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address:		Street Addre	
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	
		Tallahassee,	FL 32303

CR2E106 (05/17)

FILED

Articles of Conversion

For

Florida Limited Liability Company Into

"Converted or Other Business Entity"

2024 JAN 26 AM 10: 09

TALLAHASSEE, FLORIDA

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:			
AJX Holdings, LLC			
Enter Name of Florida Limited Liability Company			
2. The name of the "Converted or Other Business Entity" is:			
AJX Holdings, LLC			
Enter Name of "Converted or Other Business Entity"			
3. The "Converted or Other Business Entity" is a Limited Liability Comanpy (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)			
organized, formed or incorporated under the laws of Delaware (Enter state, or if a non-U.S. entity, the name of the country			
(Enter state, or if a non-U.S. entity, the name of the country The formation document is attached (if applicable).			
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.			
5. This conversion shall be effective in Florida on: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date of the conversion under the laws governing the "Other Business Entity.")			
<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.			

	verted or Other Business Entity" is an out-of-state entity not registered to ness in Florida, the "Converted or Other Business Entity":		
Departm	the following street and mailing address of an office the Florida ent of State may send and process served on the department pursuant to and Chapter 48.		
Street Address:	5173 Waring Rd STE 2		
Mailing Address:	San Diego, CA 92120		
	5173 Waring Rd STE 2		
	San Diego, CA 92120		
appraisal righ	ed or Other Business Entity" has agreed to pay any members having ts the amount to which such members are entitled under ss. 605.1006 -605.1072, F.S.		
Signed this	20th day of March , 20 23		
Signature:	Must be signed by a Member or Authorized Representative		
Printed Name: _	Lilian Michelle Trujillo Managing Member Title:		

Page 2 of 2

\$30.00 (Optional)

\$5.00 (Optional)

\$25.00

Fees: Filing Fee:

Certified Copy:

Certificate of Status:

2024 JAN 26 AM 10: 09