# L25000170480

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
·
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1,10,100,010,010
W24000138944

Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 19, 2025

JEFFREY BEEK 455 NE 5TH AVE STE D301 DELRAY BEACH, FL 33483 US

SUBJECT: JSB68, LLC

Ref. Number: W24000138944

We have received your document for JSB68, LLC and check(s) totaling \$180.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The printed name and signature on behalf of the "Other Business Entity" is missing from the document. Please place the printed name and signature on the designated lines.

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 on (850) 245-6052.

Monique K Anderson Regulatory Specialist II

Letter Number: 424A00022461

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

#### **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.

(Enter Name of Other Business Entity)	
,,	<del></del> '
2. The "Other Business Entity" is a	ommon law or business trust, etc.)
First organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity	y, the name of the country)
on <u>0.1-33-3034</u> (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached	Articles of Organization:
	8
(Enter Name of Florida Limited Liability Company)	<del></del> ·
4. If not effective on the date of filing, enter the effective date: 3-15-2034 (The effective date: Cannot be prior to date of receipt or filed date nor more that 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 document's effective date on the Department of State's records.	an 90 calendar days after
5. The plan of conversion has been approved in accordance with all applicable statut	es.
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members having appropriate which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.</li> </ol>	praisal rights the amount to

Signed this 15 day of Pevenbu	20 24			
Signature of Authorized Representative of Limit	ited Liability Company:			
Signature of Authorized Representative:  Printed Name: Jeffen Beek	1	_		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]			
Signature: Seric Beric	Title: OFFICER	- -		
Signature:Printed Name:	Title:	-		
Signature:Printed Name:	Title:	-		
Signature:Printed Name:	Title:	-		
Signature:Printed Name:				
Signature:Printed Name:				
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.			
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:			
<b>If Florida Limited Partnership or Limited Liabilit</b> Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	٦,.	21	
All others: Signature of an authorized person.		[A::::	2025 1145	1
Fees:			; s	1- y
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		i: 25	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
JSB 48, L.	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
455 DE 5th AVR STE D-301 Dellay Really, FL 33483	455 PE 5th Ave STE D-301 Delray Beach, FG 33483
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's Signature: cred Agent. You must designate an individual or another
	MERCHANDIS INC.
	Box NOT acceptable)  FL 33483  Zip
Having been named as registered agent and to	accept service of process for the above stated limited

Registered Agent's Signature (REQUIRED)

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..

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager  AMBR  AMBR  AMBR	Jeffrey BERK 455 NE 5+1 AVE D-301 Dellay Beach, Fr 33483
	A 22
(Use attachment if necessary)	
RTICLE V: Other provisions, if any.	
	22 25
REQUIRED SIGNATURE:	
This document is executed in accordance v	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the the Department of State constitutes a third degree felony
Jeferey	Beek ed or printed name of signee
	Filing Fees
\$125.00 Filing Fee for Articles of \$ 30.00 Certified Copy (Optional)	Organization and Designation of Registered Agent  S 5.00 Certificate of Status (Optional)