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(Re	equestor's Name)			
(Ad	ldress)			
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. (Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special instructions to	Filing Officer:			
		-		

Office Use Only

S. HAWKESMAR **9** 2009

EXAMINER



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02/25/09--01015--022 **150.00



S. HAWKES

EXAMINER



February 27, 2009

MICHELLE BARRON 20900 WEST DIXIE HIGHWAY AVENTURA, FL 33180

SUBJECT: SJF, L.L.C.

Ref. Number: W09000009558

We have received your document for SJF, L.L.C. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

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) 245-6955.

Letter Number: 409A00006989

Suzanne Hawkes Regulatory Specialist II

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

COVER LETTER

Division of (
SUBJECT: SJF,	L.L.C.			
	(Name of Resulting	Florida Limited Compar	ıy)	
	usiness Entity" into a '		n, and fees are submitted to oility Company" in	
Please return all cor	respondence concernin	g this matter to:		
Michelle Barron				
	(Contact Person)			
Law Offices of Frye, B				
	(Firm/Company)			
20900 West Dixie Hig	nway			
	(Address)			
Aventura, FL 33180				
	City, State and Zip Code)			
For further informat	ion concerning this ma	tter, please call:		
Michelle Barron		at (305) 93	1-3200	
(Name of Cont	act Person)	(Area Code and	Daytime Telephone Number)	
Enclosed is a check	for the following amou	int:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES	S:	MAILING	ADDRESS:	
Registration Section		Registration Section		
Division of Corporat	tions		Corporations	
Clifton Building		P. O. Box 6		
2661 Executive Central Tallahassee, FL 323		Tallahassee	s, FL 32314	

Certificate of Conversion For "Other Business Entity" Into Florida Limited Liability Company



This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

•			
Signed this 19 m day of Feb.	_20 <u>09</u>		
Signature of Member or Authorized Representa	ative of Limited Liability Go	ompany:	
Signature of Member or Authorized Representative Printed Name: Steven Feller	e: Title managing member		
Signature(s) on behalf of Other Business Entity:	[See below for required signs	nare/s].]	
Signature: Printed Name: Steven Feller	Title: director		
	1/ 50 /	· · · · · · · · · · · · · · · · · · ·	
Signature:Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature:Printed Name:	Title:	SEE SEE	
Signature:Printed Name:		A A A	Carrana Ti
Printed Name:	Title:	<u> </u>	T E
Signature:			
Printed Name:	Title:	77.77. N	-1000
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.		2	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.			
Fees:			
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I: NAME

The name of the Limited Liability Company is: SJF, L.L.C.

ARTICLE II: ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address 500 NE 3rd Avenue Fort Lauderdale, FL 33301

Mailing Address
500 NE 3rd Avenue
Fort Lauderdale, FL 33301

ARTICLE III: PURPOSE

The Company is organized to continue the business of SJF, Inc.

ARTICLE IV: REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Steven Feller 500 NE 3rd Avenue Fort Lauderdale FL 33301

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 608, F.S.

Registered Agent Signature

ARTICLE V: MANAGER(S) OR MANAGING MEMBER(S)

The name and address of each manager or managing member is as follows:

Title Name & Address
MGRM Steven Feller

500 NE 3rd Avenue

Fort Lauderdale, FL 33301

article vi: effective date date of filing

REQUIRED SIGNATURE:

STEVEN ELLER, Managing Member

