#1300000621

(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:		

Office Use Only



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K. SALY EXAMINER

JAN - 2 2013

COVER LETTER

SUBJECT: Hand 5's Wholesales LLC (Name of Resulting Florida Limited Company) The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted "Other Business Entity" into a "Florida Limited Liability Company" in accordance with Please return all correspondence concerning this matter to:	
"Other Business Entity" into a "Florida Limited Liability Company" in accordance with	<u></u>
Please return all correspondence concerning this matter to:	to convert an s. 608.439, F.S.
у солине солине или от солине и по о	
Gale W. BlockER	
Gale W. BlockER (Contact Person) And J'S Wholesales ILC (Firm/Company)	
1419 B Market ST	
(Address) Tallahassee F2 32315 (City, State and Zip Code)	
(City, State and Zip Code) Objecter & Comcast, net E-mail address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
Cale Blocker at (850) 569 2305— (Name of Contact Person) (Area Code and Daytime Telephone Number)	-
Enclosed is a check for the following amount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\int \text{S125.00 Filing Fees} \text{and Certificate of Status} \text{S180.00 Filing Fees} \text{Certified Copy, and Certificate of Status} \text{Certificate of Status}	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

Tallahassee, FL 32301

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.

	Other Business Entity" immedi	ately prior to the filing of this Certificate of
Conversion is:	A and J's	Wholesale Group INC
	(Enter Name of O	Wholesale Group INC ther Business Entity) #P/1000021944
2. The "Other Busine (F.		corporation, limited partnership, on law or business trust, etc.)
first organized, forme	ed or incorporated under the law (Enter state, or if a non-U.S. 6	entity, the name of the country)
on	7 2011 "Other Business Entity" wa	s first organized, formed or incorporated)
5	of the "Other Business Entity" aized, formed or incorporated:	was changed, the state or country under the laws of
4. The name of the F Organization:	lorida Limited Liability Compa	any as set forth in the attached Articles of
Aan	d J's Wholes	imited Liability Company)
1	(Enter Name of Florida I	limited Liability Company)
filed by the Florida	the date of filing, enter the effective of the date of filing, enter the effective of the date of the date; AND 2) Organization, if an effective of the date of th	re than 90 days after the date this document is must be the same as the effective date listed in the date is listed therein.)
6. The conversion is p	permitted by the applicable law	(s) governing the other business entity and the

. . . .

conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this	day of	20	<u>-</u>		
Individual signing affi constitutes a third deg	rms that the facts sta ree felony as provide	d for in s.817.155, F.S.	e true. Any false information		
Signature of Member of Printed Name:	or Authorized Repress	entative:ale LKER_ Title:O w	W Blocker		
Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]					
Printed Name: 1 Hen	iky L. BLocker	Title:			
Printed Name:	avin D. M	MAIS Title:			
		2 octons			
Signature:Printed Name:		Title:			
Signature:Printed Name:		Title:			
Signature:Printed Name:		Title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.					
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.					
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.					
All others: Signature of an authoriz	ed person.				
Fees:					
Certificate of Conversi Fees for Florida Article Certified Copy: Certificate of Status:		\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company, the abbreviation "L.L.C.," or the designation "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:
1474-B Market St P.D. Box 12726 Tallahassee, Fi 32312 Tallahassee, Fi 32309
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Gale W Blocker
Cale W Blocker Name
Name Name 1474-B Market 5+ Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
Talla FL 32312 . Brid.
City, State, and Zip
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's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or The name and address of each N	Managing Member(s): Manager or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Cale W. Blocker 1474B Market St Tallahassee, Fr. 32342
	
(Use attachment if necessary) ARTICLE V: Effective date, if other	than the date of filing: (OPTIONAL)
(The effective date: 1) cannot be price	or to nor more than 90 days after the date this document is filed by ND 2) must be the same as the effective date listed in the attached
REQUIRED SIGNATURE:	
	V Blocken
Signature of a member or	an authorized representative of a member.
the penalties of perjury that the facts s document to the Department of State), Florida Statutes, the execution of this document constitutes an affirmation under stated herein are true. I am aware that any false information submitted in a constitutes a third degree felony as provided for in s.817.155, F.S.)
Gale	oed or printed name of signee
Тур	oed or printed name of signee