L13000072498

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
	WAIT			
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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FILED

SECRETARY OF STATE
SECRETARY OF STATE

C. LEWIS
MAY 17, 2013
EXAMINER



Division of Corporations

May 9, 2013

TINA M. ANASTASIO / JOKAJOAN, LLC 15849 MARCELLO CIR. NAPLES, FL 34110

SUBJECT: JOKAJOAN, L.L.C. Ref. Number: W13000027443

We have received your document for JOKAJOAN, L.L.C. and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because Chapters 607, 608, and 620, Florida Statutes, require the certificate of conversion and the documentation forming the resulting Florida business entity be filed simultaneously, the enclosed certificate of conversion cannot be filed. Our records reflect the documentation forming the resulting Florida business entity was previously filed with this office. Therefore, we are enclosing the form and instructions for filing a merger.

If you have any further questions concerning your document, please call (850) 245-6051.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 213A00011506

COVER LETTER

Division of Corporations		
SUBJECT: JOKAJOAN, LLC.		
(Name of Resulting	g Florida Limited Company)	
The enclosed Certificate of Conversion, Articles of "Other Business Entity" into a "Florida Limited I	of Organization, and fees are submitted to convert an Liability Company" in accordance with s. 608.439, F.S.	
Please return all correspondence concerning this	matter to:	
Tina M Anastasio		
(Contact Person)		
JOKAJOAN, LLC,		
(Firm/Company)	······································	
15849 Marcello Cir		
(Address)	······································	
Naples, FL 34110		
(City, State and Zip Code)		
homelifeluxuryproperties@gmail.com		
E-mail address: (to be used for future annual report notifica	ations)	
For further information concerning this matter, p	lease call:	
Tina M Anastasio at (239) 398-6167	
(Name of Contact Person)	(Area Code and Daytime Telephone Number)	
Enclosed is a check for the following amount:		
	1.00 Filing Fees Certified Copy \$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	n Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building P. O. Box 6327 Tellahagua El 32314		
2661 Executive Center Circle Tallahassee, FL 32314		

Tallahassee, FL 32301

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED

13 MAY 16 AM 10: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of
Conversion is: Tina Marie Anastasio, P.A. P//000 7/690
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
(Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
on 8/10/2011 .
(Enter date "Other Business Entity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
<u>Florida</u>
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
JOKAJOAN, L.L.C.
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: (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 listed in the attached Articles of Organization, if an effective date is listed therein.)
6. The conversion is 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 29th day of April	20 <u>13</u>				
Signature of Member or Authorized Representative of Limited Liability Company: Individual signing affirms 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.					
Signature of Member or Authorized Repres Printed Name: <u>Tina Anastasio</u>	entative: Tina M Anastasio Title: President/Owner				
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).]					
Signature: V W Printed Name: Tina M Anastasio	Title: President/Owner				
Signature: Printed Name:	Title:				
	五位 3				
	Title: Title: Title: 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 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) Page 2 of 2				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

JOKAJOAN, LLC. (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 Liabili	ity Company is:
Principal Office Address:	Mailing Address:	
15849 Marcello Circle	15849 Marcello Circle	
Naples, FL 34110	Naples, Ft 34110	
ARTICLE III - Registered Agent, Regis	stered Office, & Registered Agent's Sig	nature:
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	n Registered Agent. You must designate an individual o	gnature: or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	n Registered Agent. You must designate an individual of the registered agent are:	or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	n Registered Agent. You must designate an individual of the registered agent are:	or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	n Registered Agent. You must designate an individual of the registered agent are: sio Name	TALLAHASSEE
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Tina M Anastas 15849 Marcell	n Registered Agent. You must designate an individual of the registered agent are: sio Name	TALLAHASSEE, FI
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Tina M Anastas 15849 Marcell	n Registered Agent. You must designate an individual of the registered agent are: sio Name	TALLAHASSEE

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 Agehit's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:		FILED	
Title: "MGR" = Manager "MGRM" = Managing M	Name and Address:	13 MAY 16 AN 10: 05 SECHLIARY OF STATE TALLAHASSEE, FLORIDA:	
<u>MGRM</u>	Tina M. Anas 15849 Marcella Naples, FL. 3411	tasio o Circle	
(Use attachment if necess ARTICLE V: Effective date, it	f other than the date of filing:(OPTIONAL)		
the Florida Department of Sta	be prior to nor more than 90 days after the date tate; AND 2) must be the same as the effective dan effective date listed therein.)		
- · · · · · · · · · · · · · · · · · · ·	nber or an authorized representative of a member.		
the penalties of perjury that the document to the Department of	28.408(3), Florida Statutes, the execution of this document come facts stated herein are true. I am aware that any false inform of State constitutes a third degree felony as provided for in s.8. Typed or printed name of signee	mation submitted in a	