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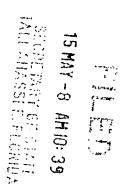
	707-12421
(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	dusiness Entity Name)
(D	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

Office Use Only



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A. STATES MAY 1 A 2015

COVER LETTER

Division of C				
SUBJECT: JIREH M	ULTISERVICES LLC			
Sobolic II.	(Name	of Resulting Florida Limite	ed Company)	
			nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.	
Please return all corr	espondence concernin	g this matter to:		
JHON RODRIGUEZ				
	(Contact Person)	· · · · · ·		
	(Firm/Company)			
3095 S MILITARY TRA		··· ···		
	(Address)			
LAKE WORTH FL 3340		· · ·		
•	City, State and Zip Code)			
jhonrelator@hotmail.com				
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:	•	
JHON RODRIGUEZ		at (⁵⁶¹) ⁵⁷⁴⁹	110	
(Name of Conta	ct Person)	(Area Code) (Da	ytime Telephone Number)	
Enclosed is a check f	or 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 A	ADDRESS:	
Registration Section		Registration		
Division of Corporat	ions	Division of C		
Clifton Building	G: 1	P. O. Box 6327		
2661 Executive Cent Tallahassee, FL 323		Tallahassee,	rl 32314	

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

1. The name of the "Other Busine JIREH MULTISERVICES INC	ess Entity" immediately prior to the filing of the Art	cicles of Conversion is:
(Ei	nter Name of Other Business Entity)	
2. The "Other Business Entity" is	a CORPORATION	·
·	(Enter entity type. Example: corporation, limited partnersl general partnership, common law or business trust, etc.)	
First organized, formed or incorpo	orated under the laws of FL (Enter state, or if a non-U.S. entity,	
on 12/05/2007 (date of organization, formation or in	(Enter state, or if a non-U.S. entity,	the name of the country)
(date of organization, formation or in	ncorporation)	
3. The name of the Florida Limite	ed Liability Company as set forth in the attached A	rticles of Organization:
JIREH MULTISERVICES LLC		
(Enter Nam	e of Florida Limited Liability Company)	
4. If not effective on the date of fi	iling, enter the effective date:	 .
date this document is filed by the date listed in the attached Articles.	e prior to date of receipt or filed date nor more to the Florida Department of State; AND 2) must be less of Organization, if an effective date is listed those not meet the applicable statutory filing requirements, this ment of State's records.	the same as the effective nerein.)
5. The plan of conversion has been	n approved in accordance with all applicable statute	s.
	D 4 00	30 Z

Page 1 of 2



Signed this <u>05</u> day of <u>MAY</u>	20_2015	
Signature of Authorized Representative of Lim	ited Liability Company:	
Signature of Authorized Representative: Printed Name: MARIA VELASCO	Title: AMBR	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: HULL Y Printed Name: MARIA VELASCO	Title: PRESIDENT	
Signature:Printed Name:	Title:	
Signature: Printed Name:		
Signature: Printed Name:		
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:	2 01
All others: Signature of an authorized person.	. }	S MAY -
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	40.39

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	ame:				
The name of the	Limited Liability Company	is:			
JIREH MULTISER'		iability Company, "L.L.C.," or "LLC.")			
ARTICLE II - A	Address:				
The mailing addr	ess and street address of the	e principal office of the Limited	d Liability Co	ompa	ny is:
Principal Office	Address:	Mailing Address:			
3095 S MILITARY LAKE WORTH FL		3095 S MILITARY TRAIL SI LAKE WORTH FL 33463	UITE 4		
business entity with a	n active Florida registration.) Florida street address of the JHON RODRIGUEZ Na 3095 S MILITARY TRAIL S	ame	TALESSANA SAME S	15 MAY -8 AM 10	tota da e e e e e e e e e e e e e e e e e e
	LAKE WORTH	FL 33463	76 14	ယ္အ	ee, f
	City	Zip	25.5 23.5 km²	(30)	
liability com registered agen statutes relati	apany at the place designated to and agree to act in this caping to the proper and compley bligations of my position as	d to accept service of process for d in this certificate, I hereby according to further agree to comply the performance of my duties, and registered agent as provided for formative (REQUIRED)	ept the appor y with the pro d I am famili	intme ovisio ar wi	nt as ns of all th and

Page 1 of 2

(CONTINUED)

Δ	RT	r T d	T	F	IV.

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	MARIA E VELASCO
	3095 S MILITARY TRAIL # 4
	LAKE WORTH FL 33463
AMBR	JHON M RODRIGUEZ
	3095 S MILITARY TRAIL # 4
	LAKE WORTH FL 33463
	
an effective date is listed, the date mu or 90 days after the date of filing.)	the date of filing: 05/08/2015 (OPTIONAL) ast be specific and cannot be more than five business days price the applicable statutory filing requirements, this date will not be listed as tate's records.
TICLE VI: Other provisions, if any.	
	<u>≥å </u>
REQUIRED SIGNATURE: \land	
	lma 1
	LUL J
(In accordance with section 605.026 constitutes an affirmation under the po	ber or an authorized representative of a member 32 05 (3), Florida Statutes, the execution of this document enalties of perjury that the facts stated hereinate true, submitted in a document to the Department of States ovided for in s.817.155, F.S.)
MARIA E VELASCO	

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)