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(Re	equestor's Name)	
(Ad	ldress)	
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		- <u>-</u> -
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
·······················(Ru	ısiness Entity Nan	ne)
(50	omess Entry Hum	
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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07/17/15--01031--020 **21.25

06/26/15--01016--022 **128.75

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7-21-15 4

Office Use Only

Wrong form was submitted with \$128.75 check. downer+ #: WISOXXX 44864

New form for Conversion with \$150 - \$128.75 credit on file ₹\$21.25 balance due

15 JUL 16 AH II: 3

COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT: JATEO	FLORIDA LLC			
	(Name	of Resulting Florida I	imited Co	mpany)
				es are submitted to convert an "Other dance with s. 605.1045, F.S.
Please return all co	rrespondence concernin	g this matter to:		
CHESTER INGALLS				
	(Contact Person)			
INGALLS ASSOCIA	TES, PA, CPAS			
	(Firm/Company)			
3495 5TH AVENUE				
	(Address)			
ST. PETERSBURG, I	FL 33713			
	(City, State and Zip Code)			
BUU@INGALLSCPA				
E-mail Address: (to	be used for future annual re	port notifications)		
For further informa	ation concerning this ma	tter, please call:		
CHESTER INGALLS		at (⁷²⁷)	327-0406	
(Name of Co	ntact Person)		(Daytime	Telephone Number)
Enclosed is a check	c for the following amou	int:		
\$150.00 Filing Fee (\$25 for Conversion & \$125 for Articles of Organization)	s = \$\square\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing F and Certified Copy	Ce	\$185.00 Filing Fees, rtified Copy, and rtificate of Status
STREET ADDRE Registration Section Division of Corporal Clifton Building 2661 Executive Ce Tallahassee, FL 33	n ations nter Circle	Registra Divisior P. O. Bo	NG ADD tion Secti of Corpo x 6327 see, FL	on orations

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: JATEC FLORIDA LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of DELAWARE DIVISION OF CORPORATIONS
on 10/24/2014 (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization San JATEC FLORIDA LLC
(Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing enter the effective date:
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date 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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 14TH day of JULY	20_15
Signature of Authórized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	Title: AUTHORIZED REP.
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: CM Muff	
Printed Name: ADEN MURCUTT	Title: MANAGING MEMBER
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
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 Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

JATEC FLORIDA LLC		
	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	ne principal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
3495 5TH AVENUE NORTH	3495 5TH AVENUE NORTH	
ST. PETERSBURG, FL 33713	ST. PETERSBURG, FL 33713	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	cred Office, & Registered Agent's Signered Agent. You must designate an individual the registered agent are:	or another
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of INGALLS ASSOCIATES,	cred Office, & Registered Agent's Signered Agent. You must designate an individual the registered agent are:	or another
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of INGALLS ASSOCIATES,	ered Office, & Registered Agent's Si Registered Agent. You must designate an individual the registered agent are: PA. CPAS Jame	or another TALLAHASSS TALLAHASSS
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own lousiness entity with an active Florida registration.) The name and the Florida street address of INGALLS ASSOCIATES, N 3495 5TH AVENUE NORT	ered Office, & Registered Agent's Si Registered Agent. You must designate an individual the registered agent are: PA. CPAS Jame	or another TALLAHASSS TALLAHASSS
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egistered agent and agree to act in this capacity. I jurther 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	ADEN MURCUTT
- India	3495 5TH AVENUE NORTH
	ST. PETERSBURG, FL 33713
MGR	JANET M. HILL
WON.	3495 5TH AVENUE NORTH
	ST, PETERSBURG, FL 33713
	,
LE V: Effective date, if other than	the date of filing: (OPTIONA
ffective date is listed, the date m days after the date of filing.) the date inserted in this block does not m t's effective date on the Department of St	ust be specific and cannot be more than five business d teet the applicable statutory filing requirements, this date will not be l
CLE V: Effective date, if other than effective date is listed, the date m 0 days after the date of filing.) The date inserted in this block does not must's effective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE:	ust be specific and cannot be more than five business d teet the applicable statutory filing requirements, this date will not be l
CLE V: Effective date, if other than effective date is listed, the date m days after the date of filing.) The date inserted in this block does not met's effective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE:	ust be specific and cannot be more than five business deet the applicable statutory filing requirements, this date will not be late's records.
CLE V: Effective date, if other than effective date is listed, the date m days after the date of filing.) The date inserted in this block does not mat's effective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men This document is executed I am aware that any false in	ust be specific and cannot be more than five business deet the applicable statutory filing requirements, this date will not be late's records.
CLE V: Effective date, if other than effective date is listed, the date m days after the date of filing.) The date inserted in this block does not meat's effective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men This document is executed I am aware that any false in	nber or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes. formation submitted in a document to the Department of State

Page 2 of 2

ARTICLE IV-