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(Re	questor's Name)	
	dress)	
(Ad	aress)	
. (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
	. ☐ WAIT	
		THE
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
`	,	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



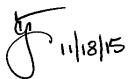
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WIND WASSEL BY THE

15 FOV 10 PH 2: 19





COVER LETTER

TO: Registration	Section Corporations			•			
	•						
SUBJECT: JOSH C	COLLINS FAMILY, LLC						
	(Name	of Resulting Florida	Limite	ed Company)			
		_	-	nd fees are submitted to cocordance with s. 605.10		"Othe	r
Please return all con	respondence concernin	g this matter to:					
JOSH COLLINS							
	(Contact Person)					*	
					ALL!	81 AQ1 9	
	(Firm/Company)				<u> </u>	2	
6220 HUDSPETH RD					17 d	CO	
	(Address)				,	75	
HARRISBURG, NC, 2	8075					$\ddot{\wp}$	
	(City, State and Zip Code)				异四	Ū.	
JCOLLINS@PRESPRO	O.COM						
E-mail Address: (to	be used for future annual re	port notifications)					
For further information	tion concerning this ma	tter, please call:					
JOSH COLLINS		_at (951-7	7770			
(Name of Con	tact Person)	(Area Code)	(Day	time Telephone Number)			
Enclosed is a check	for the following amou	ınt:					
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
STREET ADDRES	SS:	MAILI	NG A	ADDRESS:			
Registration Section		Registra	ation S	Section			
Division of Corpora	ations			Corporations			
Clifton Building		P. O. Bo)X 03.	21			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

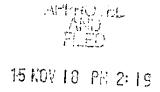
Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company



SECHLER OF STATE

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: JOSH COLLINS FAMILY, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
12/30/2009 (Enter state, or if a non-U.S. entity, the name of the country)
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizatio
JL Equity I, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 01/01/2016
(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; <u>AND</u> 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.

Page 1 of 2

Signed this <u>07</u>	_ day of <u>OCTOBER</u>	20 <u>15</u>	
Signature of Author	ized Representative of J	Limited Liability Company:	
Ciomotomo of Authoria	zed Representative:	$\Phi(h_{\alpha})$	
Printed Name: JOSHUA		Title: MEMBER	
Timed Nume.		Thie.	ı
Signature(s) on behal	f of Other Business Enti	ty: [See below for required signature(s)]	
)[]		
Signature:	POOLLING	Title: MEMBER	
/ []	TT. OOLLING	THE. WENDER	
Signature			
Printed Name:		Title:	,
Ci			
Printed Name:		Title:	
Timod Tumo.	<u> </u>		
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
	WWW.		
Signature:			
Printed Name:		Title:	
If Florida Corporatio	nn:		
	ı, Vice Chairman, Director	r, or Officer.	
If Directors or Officers	s have not been selected, a	n Incorporator must sign.	
Is Etanida Cananal Da		Lillan The sales on the first	
Signature of one Gene	<u>irtnership or Limited Lis</u> ral Partner	ability Partnership:	
orginature of one control			
		ability Limited Partnership:	
Signatures of ALL Ge	neral Partners.		
All others:			
Signature of an authori	ized person.		
•	•		ALE SEC
Fees:			
Articles of Co	ntrancion	\$25.00	[3]
Atticles of Co	1140121011	\$25.00	i

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ABBROTS		11.50
ARTICLE I - Name: The name of the Limited Liability Company	v is:	15 NOV 18 PM 2: 19
JL EQUITY I		SECHE STATE TALLAL ASSET FLORIDA
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
2304 COBB DR	6220 HUDSPETH RD	
TALLAHASSEE, FL, 32312	HARRISBURG, NC, 28075	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)		
The name and the Florida street address of t	he registered agent are:	
LINDSEY A. COLLINS		
N	ame	
2304 COBB DR		
Florida street address (P.O. Box NOT acceptable)	
TALLAHASSEE	FL 32312	
City	Zip	
Having been named as registered agent ar liability company at the place designate		

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:		Name and Address:	15 KO! 18 PH
"AMBR" = Authorize	ed Member		
"MGR" = Manager			SECTION TALLATING
AMBR		Joshua P. Collins	MULTINETE P
		2304 COBB DR	
		TALLAHASSEE, FL, 32312	
AMBR		Lindsey A. Collins	·
——————————————————————————————————————		2304 COBB DR	
		TALLAHASSEE, FL, 32312	
			······································
LE V: Effective date, fective date,	, if other than the	date of filing: 01/01/2016 be specific and cannot be more	
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LE V: Effective date, fective date is listed, days after the date of the date inserted in this bloom's effective date on the Double LE VI: Other provision This docume I am aware the constitutes a	if other than the the date must I of filing.) ock does not meet the epartment of State's ons, if any. TURE: TURE: TURE:	the applicable statutory filing requirements records. Tor an authorized representation cordance with section 605.0203 (1) (b) ation submitted in a document to the Desirable content to the Desirab	ethan five business da ents, this date will not be list eve of a member.

Page 2 of 2