L16000140640

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		!

Office Use Only



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07/21/16--01009--003 **180.00

SECRETARY OF STATE

144

COVER LETTER

TO: Registr Divisio		ection orporations			
SUBJECT:	SAPP, Li	LC			
_		(Name	of Resulting Florida	Limited	d Company)
					d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return a	ll corre	spondence concerning	g this matter to:		•
Julia Greenberg-	Aguilar				
		(Contact Person)			
MyUSAcorporat	ion.com				
		(Firm/Company)			
I Radisson Plaza	, Suite 8	00			
		(Address)			
New Rochelle, N	Y 1080	l			
	(C	ity, State and Zip Code)	· · · · · · · · · · · · · · · · · · ·		
radric@thefrontp					
E-mail Addre	ss: (to be	used for future annual re	port notifications)		
For further inf	ormatic	on concerning this ma	tter, please call:		
Julia Greenberg-	Aguilar		_at (330-2	677
(Name	of Contac	et Person)	(Area Code)	(Day	time Telephone Number)
Enclosed is a	check fo	or the following amou	int:		•
\$150.00 Filing (\$25 for Convers & \$125 for Article of Organization)	ion	□\$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 AD Registration S Division of Co Clifton Buildin 2661 Executiv Tallahassee, F	ection orporati ng e Cente	ons er Circle	Registra Division P. O. Bo	ition S n of C ox 632	orporations

INHS11 (06/15)

' Articles of Conversion For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED 16 JUL 21 PM 2: 39

SECRETARY OF STATE TALLAHASSEE FLORIDA

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 Business Entity" immediately prior to the filing of the Articles of Conversion is: JSAPP, INC. P99-106800.	
(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	
12/09/1999 (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	n:
JSAPP, LLC	
(Enter Name of Florida Limited Liability Company)	
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	

Page 1 of 2

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

, , , , , , , , , , , , , , , , , , ,		
Signed this 15th day of July .	20_16	FILED
Signature of Authorized Representative of Limi	ted Liability Company:	16 JUL 21 PM 2: 39
Signature of Authorized Representative: Printed Name: Richard J Radtke	Title: AMBR	SECRETARY OF STATE TALLAHASSEE FLORIDA
Signature(s) on behalf of Other Business Entity:	See below for required signature	
Signature: Printed Name: Richard J Radike	Title: VSTD	
Signature:		
Printed Name:	Title:	
Signature: Printed Name:		-
Signature: Printed Name:		,
Printed Name:	Title:	
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	***************************************
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.		,
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> 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

(Must end with the words "Limited Liability Company, "L.L.C.," or "LI.C.")

ARTICLE 1 - Name:

JSAPP, LLC

The name of the Limited Liability Company is:

Principal Office Address:	<u>N</u>	Mailing	Address:			
105 S Bradford Ave.		105 S Br	adford Ave.			
Tampa, FL 33609		Fampa, F	FL 33609			
The name and the Florida street Richard Radtk	address of the regi	stered :	agent are:	SEORETAR) ALLAHASSI	16 JUL 21	
	Name	****		ارت است. است ارت است. است ارت است.	PH	
105 S Bradford	l Ave.				3	
Florida stre	et address (P.O. B	ox <u>NO′</u>	T acceptable)	5	39	
Tampa		FL	33609			
	City		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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

The name and address of each person	authorized to manage and control the imited Liability
Company:	7.6 //
Title	Name and Address: SECRETARY OF STATE Jana G Radike Jana G Radike
<u>Title:</u> "AMBR" = Authorized Member	Name and Address: SECRETARY
"MGR" = Manager	ALLAHASSE STATE
AMBR	Jana G Radike
MILIX	105 S Bradford Ave.
•	Tampa, FL 33609
	v v
AMBR	Richard J Radtke
THE STATE OF THE S	105 S Bradford Ave.
	Tampa, FL 33609
	Tampart & 23007
The second secon	

- 100 18 180 20 100 18 1 100 1 3 13 -	
f an effective date is listed, the date must or 90 days after the date of filing.)	be date of filing: (OPTIONAL) be specific and cannot be more than five business days protection and cannot be more than five business days protected applicable statutory filing requirements, this date will not be listed as a records.
RTICLE VI: Other provisions, if any.	
	• • • • • • • • • • • • • • • • • • • •
REQUIRED SIGNATURE:	
Signature of a member	r or an authorized representative of a member.
Signature of a member This document is executed in ac	ecordance with section 605.0203 (1) (b), Florida Statutes.
Signature of a member This document is executed in acl am aware that any false inform	ecordance with section 605.0203 (1) (b), Florida Statutes. State in a document to the Department of State
Signature of a member This document is executed in act I am aware that any false inform constitutes a third degree felony	ecordance with section 605.0203 (1) (b), Florida Statutes, ation submitted in a document to the Department of State as provided for in s.817.155, F.S.
Signature of a member This document is executed in act I am aware that any false inform constitutes a third degree felony Richard J Radtke (Member	ecordance with section 605.0203 (1) (b), Florida Statutes, ation submitted in a document to the Department of State as provided for in s.817.155, F.S.

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) Page 2 of 2