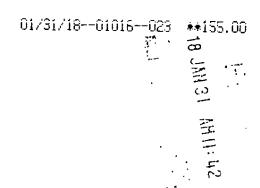
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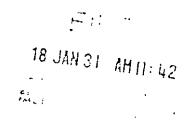
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## COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: JION CONSULTING SERV	ICES LLC
(Name	of Resulting Florida Limited Company)
	Articles of Organization, and fees are submitted to convert an "Other ted Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence conc	cerning this matter to:
BRUCE B HUBBARD	
(Contact Person)	
(Firm/Company)	<del></del>
238 WEST JERICHO TURNPIKE	
(Address)	
HUNTINGTON STATION, NY 11746	
(City, State and Zip C	Code)
bashir@nrsacetg.com	
E-mail Address: (to be used for future an	nual report notifications)
For further information concerning th	nis matter, please call:
JOANN FILINGSEL	at (S16) 813-1187 (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located i	amount: (All checks processed by this office must be payable in US n the United States)
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing and Certificate of Status	
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

## 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: JION CONSULTING SERVICES INC.
(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 January 10, 2018
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
JION CONSULTING SERVICES LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days afte the date this document is filed by the Florida Department of State.)  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.
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed thi	s <u>25TH</u>	_ day of JANUARY	20 <u>_18</u>
Signature	of Autho	rized Representative of Lim	ited Liability Company:
Signature Printed Na	of Author ime: JACQL	zed Representative:	Title: MEMBER
<u>Signature</u>	(s) on b/h:	alf of Other Byciness Entity:	[See below for required signature(s)]
Signature:		JELINE B IONESCU	u
Printed Na	me: ALQI	JELINE B IONESCU	Title: PRESIDENT/DIRECTOR
Signature:	/		
			Title:
Cimatura			
Printed Na	ıme:		Title:
Signature: Printed Na	me:		Title:
Timed 140			
Signature:			Title:
Printed Na	ıme:		Title:
Signature:			Title:
Printed Na	ıme:		Title:
Signature If Director	rs or Office	nn, Vice Chairman, Director, or irs have not been selected, an I	ncorporator must sign.
		<u>Partnership or Limited Liabi</u> leral Partner.	lity Partnership:
		Partnership or Limited Liabi ieneral Partners.	lity Limited Partnership:
All others Signature		orized person.	
<u>Fees:</u>			
Ar	ticles of C	Conversion:	\$25.00
		ida Articles of Organization:	\$125.00
	ertified Co ertificate o		\$30.00 (Optional) \$5.00 (Optional)
(	inneate 0	i Status.	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
JION CONSULTING SERVICES LLC  (Must contain the words "Limited Liability	Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2295 S OCEAN BLVD, SUITE 816 PALM BEACH, FLORIDA 33480	2295 S OCEAN BLVD, SUITE 816 PALM BEACH, FLORIDA 33480
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
JACQUELINE B IONESCU	gistered agent are:
Name	<u> </u>
2295 S OCEAN BLVD, SUITE 81	16 至
Florida street address (P.O.	Box NOT acceptable)
PALM BEACH	FL 33480
City	Zip
liability company at the place designated in a registered agent and agree to act in this capacity statutes relating to the proper and complete po	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of al erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S  Advice (REQUIRED)

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

'AMBR" = Authorized Member	
'MGR" = Manager	
MGR	JACQUELINE B IONESCU
	2295 S OCEAN BLVD, SUITE 816
	PALM BEACH, FL 33480
<del></del>	
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Use attachment if necessary)	
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	<b>7</b> /
LE V: Other provisions, if any.	a B bree -
REQUIRED SIGNATURE:	er B/mer ;
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member or This document is executed by accordance	with section 605,0203 (1) (b), Florida Statutes. I am aware t
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information surprised in a docu	with section 605,0203 (1) (b), Florida Statutes. I am aware
Signature of a member or This document is executed in a document as provided for in s.817.155, F.S.	an authorized representative of a member - with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fe
Signature of a member or This document is executed in a document as provided for in s.817.155, F.S.  JACQUELINE B IONESCU	with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fe
Signature of a member or This document is executed in a document as provided for in s.817.155, F.S.  JACQUELINE B IONESCU	with section 605,0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fellowed or printed name of signee
Signature of a member or This document is executed in a document as provided for in s.817.155, F.S.  JACQUELINE B IONESCU  Ty	with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fe