# L18000079689

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone#	<del>)</del>
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	)
(D	ocument Number)	
·	·	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



500309456585

02/28/18--01046--017 \*\*155.00

A HAR IS PM 4: 4.3
SECRETARY OF STATE
TALLAHASSEE, FLORIGIE

•

D O'KEEFE MAR 30 2018

W18-20563



## RECEIVED 2018 HAR 15 APH 12: 27

### FLORIDA DEPARTMENT OF STATE CORPORATIONS Division of Corporations Division of Corporations SURE AU OF COMMERCIAL INFORMATION SERVICES

March 2, 2018

CHAD JUSTICE 972 INTERNATIONAL PARKWAY LAKE MARY, FL 32746

SUBJECT: CW JUSTICE, LLC Ref. Number: W18000020563

We have received your document for CW JUSTICE, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Signatures on behalf of Other Business Entity are missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 618A00004279

18 MAR IS PM 4: 43
SECNETARY OF SECULATIONS
INTO A MASSEE FROM SECULATION OF SECURATION OF SECULATION OF SEC

#### **COVER LETTER**

TO:	New Filing Son Division of C						
CUDI		Wealth Management Grou	p, LLC				
20R1	IECT:	(Name of Re	sulting Florida	Limited Cor	npany)		
		s of Conversion, Artic a "Florida Limited L	_				Othe
Please	e return all corre	espondence concernin	g this matter	to:			
Chad.	Justice / Tri	Contact Person)			ø		
Johnso	on Wealth Manage		,, <u>.</u>		\$		
		(Firm/Company)					
972 In	ternational Parkwa	ıy					
		(Address)					
Lake I	Mary, FL 32746						
	(0	City, State and Zip Code)		<del></del>			
HR@0	Collaborativewealt	h.com					
E-r	nail Address: (to b	e used for future annual re	port notificatio	ns)			
For fu	ırther informati	on concerning this ma	tter, please c	all:			
Tricia	Schwartz		at (407	792-	3336		
+	(Name of Conta	ct Person)	at ((Area (	Code) (Day	3336 ytime Telephone Number	<del></del> )	
		or the following amou a bank located in the	ınt: (All chec	ks proces			ı US
(\$25 fc & \$125	50.00 Filing Fees or Conversion 5 for Articles anization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 F and Certified		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	<b>=</b> 0 _	
New I Divisi Clifto 2661	EET ADDRESS Filing Section ion of Corporation on Building Executive Center nassee, FL 3230	ions er Circle	Ne Div P. (	w Filing S vision of C O. Box 63	Corporations	8 MAR 15 PM 4: 48 ECRÉTART CHISTAI KLIAHASSEE, FLORID	•

INHS11 (7/17)

•

#### **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 Business Entity" immediately prior to the filing of the Articles of Conversion is: Johnson Wealth Management Group, LLC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	c.)
First organized, formed or incorporated under the laws of	
October 23, 2007 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	:
CW Justice, 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 after 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.	r
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.	<b>,</b>

•	
Signature of Authorized Representative of Limi	ted Liability Company:
/ 4/	
Signature of Authorized Representative:	172
Printed Name: Chad Justice	Title: President/CEO
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Signature:	
Printed Name: Chack Justice	Title: Waldert ICED
Signature:	
Printed Name:	Title
Timed Name.	Title.
a.	
Signature:Printed Name:	m 1
Printed Name:	Title:
Signature:	
Printed Name:	Title:
•	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title
Timed Name,	Title.
ICD 21 C	
If Florida Corporation:	0.05
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	vy 23mm
organica of <u>resp.</u> General Faltities.	
All othors	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	` <b>-</b>
Certificate of Status.	\$5.00 (Optional)

Signed this 21 day of February 20 18

18 MAR 15 PM 4: 4

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ed Liability Company, "L.L.C.," or "LLC.")
of the principal office of the Limited Liability Company is
Mailing Address:
972 International Parkway

The name and the Florida street address of the registered agent are:

business entity with an active Florida registration.)

Chad Justice			<b>5</b> 0		
Na	me		ALL'AI	8 MAR	
972 International Parkway			AS	20	7
Florida street address (P	O. Box <u>NO</u>	T acceptable)	SH SH	S	
Lake Mary	FL	32746		<u></u>	₹7
City		Zip		1 <del></del>	

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)

ARTICLE IV-	
The name and address of each person authorized to manage and control the Limited Liabi	ility
Company:	

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
		- -
		_
<del></del>		_
		-
		_
		- -
•		
(Use attachment if necessary)	AASS	i F-
RTICLE V: Other provisions, if any.		
-	· (+-	~. •

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Chad Justice

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)