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(Re	equestor's Name)	
. (A	ddress)	
(Ad	ddress)	
(C	ity/State/Zip/Phone #)	·
PICK-UP	☐ WAIT	MAIL
(8	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

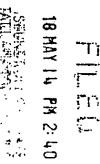
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COVER LETTER

SUBJECT: TRON Bridge Holdings LLC
(Name of Resulting Florida Lanited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Diana Jankins (Contact Person)
Jenkins Wealth Management Group LLC (Firm/Company)
22316 Oakville Dr.
Land OLakes, FL 34639 (City, State and Zip Code)
E-mail Address: (to be used for future annual report romications)
For further information concerning this matter, please call:
(Name of Contact Person) at (813) 838 - 557/ (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) S150.00 Filing Fees and Certificate of S180.00 Filing Fees and Certified Copy Certificate of Status S180.00 Filing Fees and Certified Copy 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

TO: New Filing Section

Division of Corporations

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:
(Enter Namo of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on 217 2016 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: TRON Bridge Holdings // (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.
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 this 30 day	of April	20 <u> </u>	<u>`</u> .
Signature of Authorized	Representative of Limit	ed Liabili	ity Company:
Signature of Authorized R Printed Name:	epresentative: Lic	Title:	member
Signature(s) on behalf of	Other Business Entity: [5	See below	for required signature(s)
Signature:	or Smull	Title:	incor porator
Frinted Name.	167 2 MIM	_ 1100	WILDE PORTOR
Signature:			
Printed Name:		_ Title:	
Signature:			
Printed Name:		_ Title:	
Printed Name:		Title	
rimed Name.	<u> </u>	_ 1100	
Signature:			
Printed Name:		_ Title:	
Signature:			
Printed Name:		_ Title:	
If Florida Corporation: Signature of Chairman, Vic If Directors or Officers hav	e Chairman, Director, or C	Officer.	
If Florida General Partne Signature of one General Pa		y Partners	ship:
If Florida Limited Partne Signatures of <u>ALL</u> General		<u>y Limited</u>	Partnership:
All others: Signature of an authorized i	nerson		

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TRON	<u> </u>		LLC
(Must contain th	e words "Limited Limbility Co	ompany, "L.L.C.," or "LL.C.)	

ARTICLE II - Address:

Principal Office Address:

ARTICLE I - Name:

The name of the Limited Liability Company is:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

ton 6	wood a	<u></u>	_223	316 Oak	villa Dr.		
Washingt	on, NS	C7882	Lan	Olak	34634		
ARTICLE III - R (The Limited Liability Cobusiness entity with an a	ompany cannot ser	ve as its own Register			ent's Signature		
The name and the l	Florida street a	address of the re	gistered agei	nt are:	SHOT	TIB MAY	T:
		Name			17 **** 17 *****	=	1
	<u> </u>	316 Oa	Kville	<u> 2</u>	΄, τ.	75	(1)
	Florida stre	et address (P.O.	Box <u>NOT</u> a	cceptable)	. , ,	۲ نا	*.*
	Land	Olales	FL :	346639	,	10	
		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)

Λ	R	TI	CI	F	IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	JWMG Employee Profit Sharing YOLK 22316 Cakulle Dr. Land GLaker F4 34639
AMBR	KMS Management Group Profes Sharing a Trot wood Ct. Washington. NJ 07882
	<u> </u>
(Use attachment if necessary)	TANK TO SERVICE TO SER
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	ntero for JWMG Profit Showing
This document is executed in accordance w	n authorized representative of a member ith section 605.0203 (1) (b). Florida Statutes. I am aware that ent to the Department of State constitutes a third degree felony
Diana Senki	ed 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)