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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

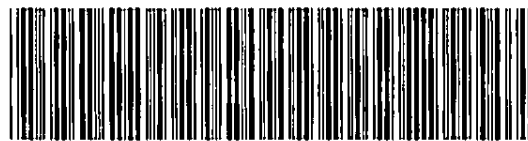
Certified Copies _____ Certificates of Status _____

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SEP 11 2018



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10 SEP -7 AM 10:25
TALLARUE
SEP 11 2018

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SSMMGL, LLC
(Name of Resulting Florida Limited 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:

Steven Sherman
(Contact Person)

1601 SE. 9th Street
(Firm/Company)
(Address)

Ft. Lauderdale, Florida 33316
(City, State and Zip Code)

ssherman10@bca10xcl.net
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Paul Sander at (972) 324-0308
(Name of Contact Person) (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)

- | | | | |
|---|---|---|--|
| <input checked="" type="checkbox"/> \$150.00 Filing Fees
(S25 for Conversion
& \$125 for Articles
of Organization) | <input type="checkbox"/> \$155.00 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$180.00 Filing Fees
and Certified Copy | <input type="checkbox"/> \$185.00 Filing Fees,
Certified Copy, and
Certificate of Status |
|---|---|---|--|

STREET ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

18 SEP - 7 AM 10:25
RECEIVED
FALL 2018

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 Section 6.05.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is SSMM, Inc.
2. The "Other Business Entity" is a corporation. First organized, formed or incorporated under the laws of the State of Texas on April 29, 2011.
3. The name of the Florida limited liability company as set forth in the attached Articles of Organization is SSMMGR, LLC.
4. The conversion shall be effective on the filing of these Articles of Conversion.
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 Sections 605.1006 and 605.1061-605.1072, Florida Statutes.

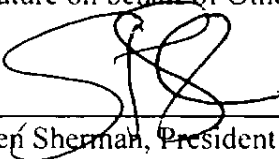
Signed this 6th day of September, 2018.

Signature of Authorized Representative of
Limited Liability Company



Steven Sherman, Manager

Signature on behalf of Other Business Entity



Steven Sherman, President

18 SEP - 7 AM 10:25
FILED
SHERMAN

ARTICLES OF ORGANIZATION

ARTICLE I – Name:

The name of the Limited Liability Company is: SSMMGR, LLC.

ARTICLE II – Address:

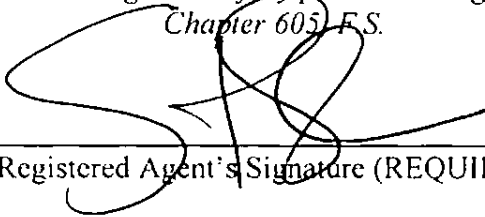
The mailing address and street address of the principal office of the Limited Liability is: 1601 SE 9th Street, Ft. Lauderdale, FL 33316

ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:

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

Steven Sherman
1601 SE 9th Street
Ft. Lauderdale, FL 33316

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)

ARTICLE IV –

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

Title:

Manager

Name and Address:

Steven Sherman
1601 SE 9th Street
Ft. Lauderdale, FL 33316



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.



STEVEN SHERMAN

Typed or printed name of signee

18 SEP -7 AM 10:25
STATE OF FLORIDA
DEPARTMENT OF STATE