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#### **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: CMC-SAMM-JV, LLC		
	esulting Florida Limited Co	ompany)
The enclosed Articles of Conversion, Articles Entity" into a "Florida Limited L	_	and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all correspondence concerning	ng this matter to:	
Scan Person		er er
(Contact Person)		
CMC-SAMM-JV, LLC		
(Firm/Company)		ALSE SEL
151 Mary Esther Blvd #301A		· · · · · · · · · · · · · · · · · · ·
(Address)		
Mary Esther FL 32569		FILED PHE:50
(City, State and Zip Code)		Est K
sean@cmc-s-corp.com		56 56
E-mail Address: (to be used for future annual r	eport notifications)	
For further information concerning this ma	atter, please call:	
Sean Person	at ( <u>850</u> ) <u>308</u>	-7136
(Name of Contact Person)	(Area Code) (Da	aytime Telephone Number)
Enclosed is a check for the following amo dollars and drawn on a bank located in the		ssed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\square{1}\$	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING	ADDRESS:
New Filing Section	New Filing	
Division of Corporations	_	Corporations
Clifton Building	P. O. Box 6.	
2661 Executive Center Circle	Tallahassee	FI 32314

Tallahassee, FL 32301

## **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 CMC/SAMM-JV, Inc.	'Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
	(Enter Name of Other Business Entity)
2. The "Other Busin	ness Entity" is a
(Enter en	ity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, form	ned or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
July 24, 2018 on	
(date of organization	i, formation or incorporation)
3. The name of the	Florida Limited Liability Company as set forth in the attached Articles of Organization:
CMC-SAMM-JV, LLC	
	(Enter Name of Florida Limited Liability Company)
(The effective date: the date this docum Note: If the date inserte document's effective date	Cannot be prior to date of receipt or filed date nor more than 90 calendar days after tent is filed by the Florida Department of State.)  d in this block does not meet the applicable statutory filing requirements, this date will not be listed as the con the Department of State's records.  rsion has been approved in accordance with all applicable statutes.
	Other Business Entity" has agreed to pay any members having appraisal rights the amount to ers are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this day	· <del></del>	<del>-</del> -	
Signature of Authorized	Representative of Lim	ited Liability Company:	
Signature of Authorized R	Representative:	Title: MGR Member	
Printed Name: Sean Person	<del></del>	Title: MGR Member	
Signature(s) on behalf of	Other Business Entity:	See below for required sign	iature(s)
Signature: SM-	-		
Printed Name: Sean Person		Title: President	
Printed Name: Melanie Adar	ns	Title: Vice President	<del></del>
Printed Name:		Title:	<del></del>
Sionature			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:Printed Name:		Title:	
Signature:	ce Chairman, Director, or re not been selected, an In ership or Limited Liabili artner. ership or Limited Liabili	Title:Officer. corporator must sign. ity Partnership:	
Signature:	ce Chairman, Director, or re not been selected, an In ership or Limited Liabili artner. ership or Limited Liabili I Partners.	Title:Officer. corporator must sign. ity Partnership:	
Signature:	ce Chairman, Director, or re not been selected, an In ership or Limited Liabili artner. ership or Limited Liabili I Partners.	Title:Officer. corporator must sign. ity Partnership:	
Signature: Printed Name: If Florida Corporation: Signature of Chairman, Vio If Directors or Officers hav  If Florida General Partne Signature of one General P  If Florida Limited Partne Signatures of ALL. Genera  All others: Signature of an authorized  Fees:  Articles of Conver	ce Chairman, Director, or the not been selected, an Intership or Limited Liability artner.  Triship or Limited Liability Partners.  person.	Title:Officer. corporator must sign. ity Partnership: ty Limited Partnership:	
Signature: Printed Name: If Florida Corporation: Signature of Chairman, Vio If Directors or Officers hav  If Florida General Partne Signature of one General P  If Florida Limited Partne Signatures of ALL. Genera  All others: Signature of an authorized  Fees:  Articles of Conver	ce Chairman, Director, or re not been selected, an In ership or Limited Liabili artner. ership or Limited Liabili I Partners.	Title:Officer. corporator must sign. ity Partnership: ty Limited Partnership:	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
CMC-SAMM-JV, LLC		
(Must contain the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
CMC-SAMM-JV, LLC	CMC-SAMM-JV, LLC	
151 Mary Esther Blvd #301A	151 Mary Esther Blvd #3017	<del>\</del>
Mary Esther FL 32569	Mary Esther FL 32569	
The name and the Florida street address of the Sean Person Na	ime	
151 Mary Esther Blvd #301A		
	P.O. Box NOT acceptable)	
Mary Esther	FL 32569	
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d in this certificate, I hereby ac pacity. I further agree to comp te performance of my duties, a	rcept the appointment as ply with the provisions of all and I am familiar with and
SM	_	18 A SECI
	Signature (REQUIRED)	FILED WIL PHE:S

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

"MGR" = Manager MGR  CMC International of Florida, Inc.  151 Mary Esther Blvd #301A  Mary Esther FL.  SAMM Enterprises Inc. PO Box 1258  Paxton FL 32538  (Use attachment if necessary)  LE V: Other provisions, if any.	"AMBR" = Authorized Member	Name and Address:
MGR  CMC International of Florida, Inc.  151 Mary Esther Blvd #301A  Mary Esther FL.  MGR  SAMM Enterprises Inc. PO Box 1258  Paxton FL 32538  Paxton FL 32538  (Use attachment if necessary)  LE 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 awar any false information submitted in a document to the Department of State constitutes a third degree I as provided for in s.817.155, F.S.  Sean Person, MGR Member		
MGR  SAMM Enterprises Inc. PO Box 1258 Paxton Fl. 32538  (Use attachment if necessary)  LE 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 awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155, F.S.  Sean Person, MGR Member  Mary Esther Blvd #301A Mary Esther Fl.  SAMM Enterprises Inc. PO Box 1258 Paxton Fl. 32538  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 awar any false information submitted in a document to the Department of State constitutes a third degree is a provided for in s.817.155, F.S.	_	CMC International of Florida Inc
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MGR  SAMM Enterprises Inc. PO Box 1258 Paxton FL 32538  [Use attachment if necessary]  LE 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 awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155, F.S.  Sean Person, MGR Member   SAMM Enterprises Inc. PO Box 1258 Paxton FL 32538		
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)