# 1800283671

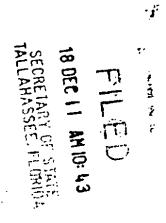
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

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## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/11/18

NAME:

J & M HOLDING LLC

TYPE OF FILING: CONVERSION

COST:

150.00

RETURN:

PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

## Articles of Conversion

For

#### "Other Business Entity"

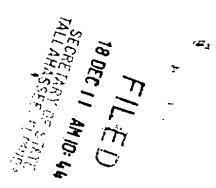
Into

#### 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: J&M HOLDING LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
01/09/1997 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:
ILJM 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.
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 / day of December 2018
Signature of Authorized Representative of Limited Liability Company:
Signature of Authorized Representative:  Printed Name: Ira E. Hantman  Title: Manager
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature:
Printed Name: Ira E. Flantman Title: Manager
Signature: Title:
Signature: Title:
Signature: Title: Title:
Signature:
Printed Name: Title:
Signature: Printed Name:Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership; Signatures of ALL General Partners.
All others: Signature of an authorized person.
Fees:

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:



# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Compa	ny is:		
ILJM LLC			
	Liability Company, "L.L.C.," or "LLC.	")	
ARTICLE II - Address:			
The mailing address and street address of	the principal office of the Lim	ited Liability Company is:	
	paragram oct. et al. a.	nica Diability Company 13.	
Principal Office Address:	<b>Mailing Address:</b>		
8472 Egret Meadow Lane	8472 Egret Meadow Lane		
West Palm Beach, FL 33412		West Palm Beach, FL 33412	
APTICI PILI PILI PILI PILI PILI PILI PILI P			
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered A Registered Agent. You must designate	Agent's Signature: an individual or another	
The name and the Florida street address of	the registered agent are:		
Ira E. Hantman			
	Name		
9472 Errot Mandou, Lun-			
8472 Egret Meadow Lane Florida street address	(P.O. Box NOT acceptable)		
Tionad Street degress	(1.0. box itol acceptable)		
West Palm Beach	FL 33412		
City	Zip		
Having been named as registered agent of liability company at the place designal registered agent and agree to act in this constantes relating to the proper and compaccept the obligations of my position.	ted in this certificate, I hereby a apacity. I further agree to con lete performance of my duties,	accept the appointment as uply with the provisions of all and I am familiar with and	
( ) A	<i>.</i>	Nam's	
Registered Agent's	Signature (REQUIRED)	- -	
Togoto ou (igoil s	o.b.maio (redoured)	Z 2 2	
		76, 22, 24,5	
(CONTINUED)		\$ <b>7</b>	

#### ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR	Ira E, Hantman	
	8472 Egret Meadow Lane	
	West Palm Beach, FL 33412	
AMER	Leslie Huwtman	
	FY72 Egret ment Down have	
	West Orlin Revel, Fr. 33412	
	"one	
(Use attachment if necessary)	AM B T	
,	ASS.	
DTICLE V. Od		
RTICLE V: Other provisions, if any.		
	©m <b>Æ</b>	
REQUIRED SIGNATURE:	· ·	
REQUIRED SIGNATURE:		
This document is executed in accordance v	in authorized representative of a member with section 605,0203 (1) (b). Florida Statutes. I am aware that	
any false information submitted in a docum as provided for in s.817.155, F.S.	ent to the Department of State constitutes a third degree felony	
/	and the same of th	
J-PA F. HA	ed or printed name of signee	
1,76	read of printed name of signice	

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)