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(Requestor's Name)
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PICK-UP WAIT MAIL
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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

19 MAR 11 AM 11: 58

T SCHRIVENER

COVER LETTER

TO: New Filing S Division of C					
SUBJECT, JOANLI	FAMILY HOLDINGS, LE	.c			
GODGECT,	(Name of Res	ulting Florida Limit	d Com	npany)	
The enclosed Article Business Entity" into	es of Conversion, Artic o a "Florida Limited Li	les of Organization ability Company	on, and	d fees are submitted to convert an ecordance with s. 605.1045, F.S.	"Other
Please return all corr	respondence concerning	g this matter to:			
MARK M. HASNER, E	SQ.				
	(Contact Person)				
THERREL BAISDEN,	LLP				
	(Firm/Company)				
I SE 3rd AVENUE, SU	ITE 2950				
	(Address)				
MIAMI, FLORIDA 331	31				
	City, State and Zip Code)	_ _			
mhasner@therrelbaisder	• • • • • • • • • • • • • • • • • • • •	•			
· ·	oe used for future annual re	port notifications)			
For further informati	on concerning this ma	·			
Mark M. Hasner, Esq.		_at (305) <u>371-5</u>	1758 time Telephone Number)	
(Name of Conti	act Person)	(Area Code)	(Day	time Telephone Number)	
	for the following amount a bank located in the		rocess	ed by this office must be payable	in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180,00 Filing and Certified Cop		☐\$185.00 Filling Fees, Certified Copy, and Certificate of Status	
STREET ADDRES	S:	MAILI	NG A	ADDRESS:	
New Filing Section		New Fi	ling S	ection	
Division of Corporat	tions			Corporations	
Clifton Building		P. O. B			
2661 Executive Cent Tallahassee, FL 323		i enana	sscc, i	FL 32314	

INHS11 (7/17)

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.

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED PARTNERSHIP
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, or
First organized, formed or incorporated under the laws of FLORIDA (Enter state, or If a non-U.S. entity, the name of the country)
(Enter state, or it a non-U.S. entity, the name of the country)
DECEMBER 30, 2003
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizatio
JOANLI FAMILY HOLDINGS, 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 aft 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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.
TAL S

Signed this day of	20 19
Signature of Authorized Representative of Limit	ted Linbility Company:
Signature of Authorized Representative:	Title: AVINOCE NEO DETREMENTA
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Delived Name IOSE L GARCIA	Did to Charle In-
Printed Name: JOSE I. GARCIA	Title: President of Joanii, Inc.
Signature:	
Signature:	Title:
Signature:Printed Name:	Title
Printed Name:	
Signature:	
Printed Name:	Title:
-	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnershin:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

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SECRETARY OF STATE FALLAHASSEE, FLORIOA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Li	ne: mited Liability Company	r is:		
JOANLI FAMILY HO		ability Company, "L.L.C.," or "L.L.C.")		
(Mu	st contain the words "Limited Lia	ibility Company, "L.L.C., or "L.C.,"		
ARTICLE II - Ad The mailing addres		e principal office of the Limite	d Liability Comp	any is:
Principal Office A	ddress:	Mailing Address:		
8200 SW 62nd Avenu	e	8200 SW 62nd Avenue		
Miami, Florida 33143		Miami, Florida 33143		
	1 SE 3rd Avenue, Suite 2950	ame) P.O. Box NOT acceptable)	RETARY OF STATE AHASSEE, FLORID	FILED
	Miami	F[_33131	RIDA RIDA	I
	City	Zip	V)	
liability comp registered agent statutes relating	any at the place designate and agree to act in this ca g to the proper and compl ligations of my position as	nd to accept service of process for in this certificate, I hereby ac apacity. I further agree to complete performance of my duties, as registered agent as provided for Signature (REQUIRED)	cept the appointm ly with the provisi nd I am familiar w	ent as ons of all vith and

(CONTINUED)

<u> Fitle:</u>	Name and Address:	
'AMBR" = Authorized Member		
'MGR" = Manager	JOSE I, GARCIA	
MGR	8200 SW 62nd Avenue	<u> </u>
	Mlumi, Florida 33143	
	Tribuni Frontan Bar (5	
MGR	ELIZABETH J. GARCIA	
	8200 SW 62nd Avenue	
	Miami, Florida 33143	
	<u></u>	<u> </u>
		 (£ £
		
		
Use attachment if necessary)		.u.c
Ose attackment it necessary)		رج
		95
E V: Other provisions, if any.		<u> </u>
	\	
REQUIRED SIGNATURE:	h	
. ##		
Signature of a weighter or	an authorized representative of a n	nember
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statut	ics. I am aware the
any false information sulphitted in a docur	ment to the Department of State constitutes a	third degree felor
as provided for in s.817.155, F.S.		
	ped or printed name of signee	
HUHREL Mi.	(-Abt) loc c	

ARTICLE IV-