(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	TIAW [MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:	New Filing So Division of Co			
CHDI	ECT:	JBLANCO RE	HAB, LLC	
SUDJ	r.C1.	(Name of Res	ulting Florida Limited Con	npany)
The er Busin	nclosed Articles ess Entity" into	s of Conversion, Articl a "Florida Limited Li	es of Organization, an ability Company" in a	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this matter to:	
JOL	RGE BLANCO. JE	₹.		
		(Contact Person)		
	_	(Firm/Company)		
500	2 SW 102ND AV		<u> </u>	
		(Address)		
M1.	AMI, FL 33165			
	((City, State and Zip Code)		
JOR	GEBLANCO.PTz	A@YAHOO.COM		
E-1	nail Address: (to b	e used for future annual re	port notifications)	
For fi	irther information	on concerning this ma	tter, please call:	
JOL	RGE BLANCO, JI	₹.	at (786) 76	8-7478
	(Name of Conta	ict Person)	(Area Code) (Day	rtime Telephone Number)
		or the following amou a bank located in the		sed by this office must be payable in US
(\$25 fd & \$12:	60,00 Filing Fees or Conversion 5 for Articles anization)	□\$155,00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	□\$185.00 Filing Fees. Certified Copy. and Certificate of Status
STRI	EET ADDRES	S:	MAILING A	ADDRESS:
	Filing Section		New Filing S	
	ion of Corporat	ions	Division of C	Corporations
	n Building		P. O. Box 63	
2661	Executive Cent	er Circle	Tallahassee.	FL 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 "Other Business Entity" immediately prior to JBLANCO REHAB INC DIG TO STORY	the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, g	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)
FEBRUARY 20, 2019	·
rdate of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set fort	h in the attached Articles of Organization:
JBLANCO REHAB, LLC	
(Enter Name of Florida Limited Liability Compar	ny)
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 the date this document is filed by the Florida Department of South If the date inserted in this block does not meet the applicable statutory if document's effective date on the Department of State's records.	date nor more than 90 calendar days after State.)
5. The plan of conversion has been approved in accordance with a	all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any a which such members are entitled under ss. 605.1006 and 605.106	
	19 MAR 12

Signed this 2nd day of MARCH	_ 20_19		
Signature of Authorized Representative of Limit	ted Liability Company:		
Signature of Authorized Representative: Printed Name: JORGE BLANCO, JR.	Gitle: MANAGER	_	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)		
Signature: JORGE BLANCO, JR.	Title: PRESIDENT	_	
Signature:Printed Name:			
Signature:Printed Name:			
Signature: Printed Name:			
Signature: Printed Name:			
Signature:Printed Name:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	Officer.		
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:		3 €
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:		HAR 12
All others: Signature of an authorized person.		161 724 125	AH 9: 44
<u>Fees:</u>			## ?;
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	JBLANCO REHAB, LLC		
, (N	lust contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	·
ARTICLE II - A	ddress:		
		e principal office of the Limited	I Liability Company
Principal Office	Address:	Mailing Address:	
5022 SW 102ND AV	/E	5022 SW 102ND AVE	
MIAMI, FL 33165		MIAMI, FL 33165	
			
The Limited Liability (business entity with ar	Company cannot serve as its own Ro active Florida registration.)	ered Office, & Registered Age egistered Agent. You must designate an i	ndividual or another
The Limited Liability (business entity with at	Company cannot serve as its own Re	egistered Agent. You must designate an i	ndividual or another
The Limited Liability (business entity with at	Company cannot serve as its own Ro active Florida registration.) Florida street address of the JORGE BLANCO, JR.	egistered Agent. You must designate an i	ndividual or another
The Limited Liability (business entity with at	Company cannot serve as its own Ro active Florida registration.) Florida street address of the JORGE BLANCO, JR.	egistered Agent. You must designate an i	ndividual or another
The Limited Liability 0 business entity with at	Florida street address of the JORGE BLANCO, JR. No. 2022 SW 102ND AVE	egistered Agent. You must designate an i	ndividual or another
The Limited Liability (business entity with ar	Florida street address of the JORGE BLANCO, JR. No. 2022 SW 102ND AVE	egistered Agent. You must designate an i	ndividual or another

(CONTINUED)

n's Signature (REQUIRED)

itle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager MGR	JORGE BLANCO, JR.
WK/K	5022 SW 102ND AVE
	MIAMI, FL 33165

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member of

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.

JORGE BLANCO, JR.

Typed 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)