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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	<del></del>

Office Use Only R KEMPLE



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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:

6/3/19

NAME: 6100 JOHNSON STREET CORP

TYPE OF FILING: CONVERSION

COST:

150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

#### **COVER LETTER**

TO:	New Filing S Division of G	Section Corporations			
SHRI	ECT: 6100 JC	DHNSON ST LLC			
3010	ECT	(Name of Re	sulting Florida Limi	ted Co	ompany)
					nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	return all con	respondence concernir	ng this matter to:		
EDWA	RD F GONZAL	EZ	•		
COMM	IUNITY CONSU	(Contact Person)		•	
6100.1	OHNSON ST S	(Firm/Company)	-	•	
		(Address)	<del></del>	•	
HOLLY	/WOOD, FL 330	024			
COMM	• •	City, State and Zip Code) MERS@GMAIL.COM			
E-m	ail Address: (to b	e used for future annual re	port notifications)		
For fu	ther informati	on concerning this ma	tter, please call:	-	
EDWA	RD F GONZALE	ΞZ	at ( <sup>305</sup>	8013	3361
	(Name of Conta	ict Person)		(Day	ytime Telephone Number)
		or the following amou a bank located in the		roces	sed by this office must be payable in US
(\$25 for & \$125	.00 Filing Fees Conversion for Articles nization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New Fi	ET ADDRESS lling Section on of Corporati	, ,	New Fil	ing S	ADDRESS: Jection

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

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 the filing of the Articles of Conversion is: 6100 JOHNSON STREET CORP  1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: 6100 JOHNSON STREET CORP
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
8/15/2017 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:
6100 JOHNSON STREET 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 3RD day of JUNE	20_19	
Signature of Authorized Representative	of Limited Liability Company:	
Signature of Authorized Representative: - Printed Name: EDWARD F GONZALEZ	Title: MANAGER	
Signature(s) on behalf of Other Business F	Entity: [See below for required signature(s)]	
Signature:	Title: PRESIDENT	
Printed Name: LOWARD   GONZALLZ		
Signature:Printed Name:	Title:	
	Title:	
Printed Name:	Title:	
Signature:	Title:	
Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected		
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		JLED
Articles of Conversion: Fees for Florida Articles of Organiza Certified Copy: Certificate of Status:	\$25.00 ation: \$125.00 \$30.00 (Optional) \$5.00 (Optional)	3:25

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N	ame:		
	Limited Liability Company	is:	
6100 JOHNSON ST	TREET I.I.C		
		ibility Company, "L.L.C.," or "LLC.")	
ADTICLET			
ARTICLE II - A The mailing addr		e principal office of the Limite	d Liability Company is:
Principal Office	Address:	Mailing Address:	
6100 JOHNSON ST	SUITE A	6100 JOHNSON ST SUITE A	4
HOLLYWOOD, FL 3	3024	HOLLYWOOD, FL 33024	
<del> </del>			<del></del>
The Limited Liability (	Registered Agent, Registe Company cannot serve as its own Ro n active Florida registration.)	red Office, & Registered Age egistered Agent. You must designate an i	ent's Signature: individual or another
The name and the	Florida street address of th	ne registered agent are:	
	EDWARD F GONZALEZ	·····	
	Na	ime	
	6100 JOHNSON ST SUITE A	<b>A</b>	
•	Florida street address (P	P.O. Box NOT acceptable)	
	HOLLYWOOD	FL 33024	
	City	Zip	
liability comp registered agent statutes relatin	pany at the place designated and agree to act in this cap ig to the proper and complet pligations of my position as	d to accept service of process for in this certificate, I hereby acceptacity. I further agree to comply the performance of my duties, and registered agent as provided for ignature (REQUIRED)	cept the appointment as y with the provisions of all ad I am familiar with and

(CONTINUED)

#### 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	
MNGR	EDWARD F GONZALEZ
•	6199 JOHNSON ST SUITE A
	HOLLYWOOD, FL 33024
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
•	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any. WFUL BUSINESS	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any. WFUL BUSINESS	
CLE V: Other provisions, if any. WFUL BUSINESS  REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:  Signature of a member or at This document is executed in accordance w	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that to the Department of State constitutes a third degree felor
REQUIRED SIGNATURE:  Signature of a member or at This document is executed in accordance wany false information submitted in a document in a d	ith section 605,0203 (1) (b) Florida Statutes, Lam aware tha

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)