# 11900168596

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	<del></del>
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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#### **COVER LETTER**

TO: New Filing Sec Division of Cor				
SUBJECT: EJP Capital	Management, LLC			
SOBOLC 1.	(Name of Res	sulting Florida Limit	nited Company)	
			ntion, and fees are submitted to convert an 'ny" in accordance with s. 605.1045, F.S.	"Other
Please return all corresp	pondence concerning	g this matter to:	:	
Mandy Patten				
	(Contact Person)		_	
	(Firm/Company)		_	
720 Goodlette Road N , Sui	<del></del>		_	
	(Address)			
Naples, Florida, 34102			_	
•	y, State and Zip Code)			
mandy@attorneyshapiro.co		41		
E-mail Address: (to be u	sed for future annual rep	port notifications)		
For further information	concerning this mat	ter, please call:	:	
Mandy Patten		_at ( 239	) 649 8050 ext 246	
(Name of Contact I	Person)	(Area Code)	c) 649 8050 ext 246 (Daytime Telephone Number)	
Enclosed is a check for dollars and drawn on a b			processed by this office must be payable i	n US
(\$25 for Conversion ar	<b>3\$</b> 155.00 Filing Fees and Certificate of tatus	S180.00 Filing and Certified Copy		
STREET ADDRESS: New Filing Section Division of Corporation Clifton Building 2661 Executive Center C Tallahassee, FL 32301		New Fil Division P. O. Bo	LING ADDRESS: Filing Section on of Corporations Box 6327 assee, FL 32314	

## 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.

EJP Co	_	
2. The Other oddiness Entry 15 a	pital Management, LLC ation, limited partnership, general partnership, common law or business trust, et	
(Enter entity type. Example: corpor	ation, limited partnership, general partnership, common law or business trust, et	c.)
City organized formed or incorporated up	dor the laws of	
rifst organized, formed of incorporated un	der the laws of Nevada (Enter state, or if a non-U.S. entity, the name of the country)	
07/29/2004 On (date of organization, formation or incorporation)		
(date of organization, formation or incorporation	<del>n</del> )	
	ty Company as set forth in the attached Articles of Organization	:
(Enter Name of Florid	a Limited Liability Company)	
4. If not effective on the date of filing, ent	er the effective date:	
	2 1 1 1 2 1 2 1 1 2 1 2 PA	r
The effective date: Cannot be prior to de the date this document is filed by the Flo	et the applicable statutory fifing requirements, this date will not be listed as the	
EJP Capital Management, LLC  (Enter Name of Floridate)  4. If not effective on the date of filing, ent	a Limited Liability Company)  04/17/2019  or the effective date:	

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.

2019 JUN 20 AM 8: 36 SECRETARY OF STATE TALLAHASSEE, FL

Signed this 17th day of April	
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative:  Printed Name: Tibor Kollar	Title; Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: Tibor Kollar	Title: Manager
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Simplifier	
Signature:Printed Name:	Title:
Signature:	Tirla
Timed Name.	- FIRE.
Signature:	
Printed Name:	INIC:
If Florida Corporation: Signäture of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In	
lf Florida General Partnership or Limited Liabili	tu Dantmanchia
Signature of one General Partner.	av Partnersing.
He Planted a Lindard Day and the Control of the Con	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
rightance of an audiorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

EID Conital Mana	agement 11 C		
EJP Capital Mana		ability Company, "L.L.C.," or "LLC.")	
	(Mark Committee World's Emilian L	anny company. D.E.C., or EEC. )	
ARTICLE II -	Address:		
The mailing add	dress and street address of t	e principal office of the Limited Liability Compa	ny is:
Principal Offic	ce Address:	Mailing Address:	
	Four	12870 Trade Way Four	
Suite 107 #687		Suite 107 #687	
The Limited Liabilit	- Registered Agent, Registry Company cannot serve as its own	Suite 107 #687  Bonita Springs, 34135  ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another	
Suite 107 #687 Bonita Springs, 34  ARTICLE III The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.)  he Florida street address of	Bonita Springs, 34135  ered Office, & Registered Agent's Signature: legistered Agent. You must designate an individual or another	
Suite 107 #687 Bonita Springs, 34  ARTICLE III The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.)  he Florida street address of  Marc 1. Shapiro	Bonita Springs, 34135  ered Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another the registered agent are:	
Suite 107 #687 Bonita Springs, 34  ARTICLE III The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.)  he Florida street address of  Marc 1. Shapiro	Bonita Springs, 34135  ered Office, & Registered Agent's Signature: legistered Agent. You must designate an individual or another	
Suite 107 #687 Bonita Springs, 34  ARTICLE III The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.)  he Florida street address of  Marc 1. Shapiro	Bonita Springs, 34135  ered Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another the registered agent are:	
Suite 107 #687 Bonita Springs, 34  ARTICLE III The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.)  he Florida street address of Marc I. Shapiro	Bonita Springs, 34135  ered Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another the registered agent are:	
Suite 107 #687 Bonita Springs, 34  ARTICLE III The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.)  he Florida street address of Marc I. Shapiro	Bonita Springs, 34135  ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:	

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

#### ARTICLE IV-

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

"AMBR" = Authorized Member	
"MGR" = Manager	
	•
MGR	EJP Capital Management Trust
	•
<del></del>	
	1-
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
CLE V: Other provisions, if any,	
	f
CLE V: Other provisions, if any,	<u></u>
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance were accordance with the second ac	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware
REQUIRED SIGNATURE:  Signature of a member of a This document is executed in accordance wany false information submitted in a document of the submitted of the	n authorized representative of a member
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance were accordance with the second ac	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.  Tibor Kollar	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware cent to the Department of State constitutes a third degree fe
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.  Tibor Kollar	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am awar

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)