L19000182710

| (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: |
| 1016-48216 |
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Office Use Only



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SECRE DARY OF STATE
TALLAHASSEE FROM STATE

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COVER LETTER

| TO: New Filing Se Division of Co | | | | |
|--|---|---------------------------------------|--------------------|---|
| SUBJECT: GNJS, LL | с | | _ | |
| | (Name of Resu | alting Florida Limite | d Com | pany) |
| The enclosed Articles Business Entity" into | of Conversion, Articl a "Florida Limited Lia | es of Organization | on, and | I fees are submitted to convert an "Other cordance with s. 605.1045, F.S. |
| Please return all corre | spondence concerning | this matter to: | | |
| Whitney Thorne | | | | |
| | (Contact Person) | | | |
| Law Offices of Scott L. S | Soelberg, P.C. | | | |
| | (Firm/Company) | | | |
| 837 East 1200 South | | | | |
| | (Address) | | | |
| Orem, UT 84097 | | | | |
| ((| City, State and Zip Code) | | | |
| gnschafer@gmail.com | | | | |
| E-mail Address: (to b | e used for future annual re | port notifications) | | |
| For further information | on concerning this ma | tter, please call: | | |
| Whitney Thorne | | at (801 |) ⁴⁹⁴⁻⁸ | 3494 |
| (Name of Conta | ct Person) | | (Day | rtime Telephone Number) |
| Enclosed is a check f dollars and drawn on | or the following amou a bank located in the | int: (All checks p United States) | rocess | sed 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 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRES | S: | MAIL | ING A | ADDRESS: |
| New Filing Section | | New F | _ | |
| Division of Corporat | ions | | | Corporations |
| Clifton Building | | P. O. E | co xo | <i>41</i> |

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

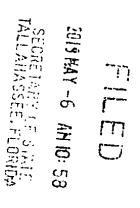
Into

Florida Limited Liability Company

The Articles of Conversion 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: GNJS, L.L.C. |
|---|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a |
| 2. The "Other Business Entity" is a |
| First organized, formed or incorporated under the laws of |
| 11/26/1997 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: |
| GNJS, 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 ofMay | 20 19. |
|--|---|
| Signature of Authorized Representative of Lin | |
| Signature of Authorized Representative: | Title: Manager |
| Signature(s) on behalf of Other Business Entity | : [See below for required signature(s)] |
| Signature: Condon Scholer Printed Name: Gordon Scholer | |
| Printed Name: Gordon Scholer | Title: June 27, 2019 |
| Signature:Printed Name: | |
| Printed Name: | Title: |
| Signature:Printed Name: | Tide |
| Printed Name: | 1 itie: |
| Signature:Printed Name: | Title |
| Printed Name: | 1 lue. |
| Signature:Printed Name: | Title: |
| Fillited Name. | Titto. |
| Signature:Printed Name: | Title |
| Timed Name. | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, | or Officer. |
| If Directors or Officers have not been selected, an | |
| If Florida General Partnership or Limited Liab | pility Partnership: |
| Signature of one General Partner. | |
| If Florida Limited Partnership or Limited Liab | oility Limited Partnership: |
| Signatures of <u>ALL</u> General Partners. | |
| All others: Signature of an authorized person. | |
| Fees: | |
| Articles of Conversion: Fees for Florida Articles of Organization Certified Copy: Certificate of Status: | \$25.00 n: \$125.00 \$30.00 (Optional) \$5.00 (Optional) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | Limited Liability Company | | |
|--|--|--|--|
| GNJS,LLC (| Must contain the words "Limited Lia | bility Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - | Address: | | |
| The mailing add | ress and street address of the | e principal office of the Limited Liability Co | ompany is: |
| Principal Office | e Address: | Mailing Address: | |
| 103 Via Verde Wa | y | 103 Via Verde Way | |
| Palm Beach Garder | | Palm Beach Gardens, FL 33418 | |
| | | | |
| | | | |
| The name and the | ne Florida street address of t Gordon Schafer N | he registered agent are: | |
| The name and the | Gordon Schafer | | |
| The name and the | Gordon Schafer N 103 Via Verde Way | | |
| The name and the | Gordon Schafer N 103 Via Verde Way Florida street address (| P.O. Box NOT acceptable) | |
| The name and the | Gordon Schafer N 103 Via Verde Way | ame | |
| Having been liability co registered ago statutes rela | Gordon Schafer N 103 Via Verde Way Florida street address (Palm Beach Gardens City named as registered agent and agree to act in this capture to the proper and compile | P.O. Box <u>NOT</u> acceptable) FL 33418 | intment as ovisions of al iar 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 | |
| MGR | Gordon Schafer |
| | 103 Via Verde Way |
| | Palm Beach Gardens, FL 33418 |
| MGR | Joy Schafer |
| | 103 Via Verde Way |
| | Palm Beach Gardens, FL 33418 |
| | |
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| | |
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| | |
| | <u></u> |
| (Use attachment if necessary) | |
| NEW Colonial in the second | |
| CLE V: Other provisions, if any. | |
| | |
| REQUIRED SIGNATURE: | |
| | 1 |
| Centon | Solufor |
| Ciatura of a mambar of | r an authorized representative of a member |

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.

Gordon Schafer, Manager

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)