L1900 192604

| (Requ | uestor's Name) | |
|----------------------------|-----------------|-------------|
| (Addı | ress) | |
| (Addı | ress) | |
| (City/ | State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busi | ness Entity Nar | me) |
| (Doct | ument Number) | <u> </u> |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Fi | iling Officer: | |
| , | | |
| | | |
| | | |

Office Use Only



800329865828

05/24/19--01021--017 **150.00

2019 JUL 22 AH-9: UZ SEORETARY OF STATE

N CULLIGAN AUG 7 2019

COVER LETTER

| TO: New Filing S Division of C | | | | |
|--|--|------------------------------------|------------------------|--|
| SUBJECT: WENJO | LLC | | | |
| 50b3LC1 | | sulting Florida Li | mited Co | mpany) |
| The enclosed Article Business Entity" into | es of Conversion, Artic o a "Florida Limited L | cles of Organiz liability Compa | ation, ar iny" in a | nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S. |
| Please return all corn | espondence concerning | ig this matter to | D : | |
| M. Richard Sapir, Esq. | | | | |
| | (Contact Person) | | | |
| Cohen Norris Wolmer R | ay Telepman Cohen | | | |
| | (Firm/Company) | | | |
| 712 U.S. Highway One, | Suite 400 | | | |
| | (Address) | | | |
| North Palm Beach, FL 3 | 3408 | | | |
| (| City, State and Zip Code) | · | | |
| nancy@romanolawgrou | p.com | | | |
| E-mail Address: (to b | e used for future annual re | port notifications |) | |
| For further informati | on concerning this ma | tter, please cal | l: | |
| M. Richard Sapir | | _at (<u>561</u> |)844-3 | 8600 |
| (Name of Conta | act Person) | (Area Co | de) (Day | rtime Telephone Number) |
| Enclosed is a check dollars and drawn or | for the following amou a bank located in the | int: (All check: United States) | s proces | sed by this office must be payable in US |
| ■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | ☐S155.00 Filing Fees and Certificate of Status | □\$180.00 Fili and Certified C | | □\$185.00 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRES | S: | MAI | LINC: A | nngree. |

New Filing Section Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

New Filing Section Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building



June 6, 2019

M. RICHARD SAPIR, ESQ. COHEN NORRIS WOLMER RAY TELEPMAN COHEN 712 U.S. HIGHWAY ONE, SUITE 400 NORTH PALM BEACH, FL 33408



SUBJECT: WENJO, LLC Ref. Number: W19000054165

We have received your document for WENJO, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist II

2019 JUL 22 AM II

Letter Number: 819A00011296

10 IIII 92 AM

<u>۔</u>

FILED 2019 JUL 22 AH 9: 02 SECRETARY OF STATE TALLAHASSEE, FL

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 Bu | sincss Entity) |
|---|---|
| The "Other Business Entity" is a Partnership (Enter entity type. Example: corporation, limite | d partnership, general partnership, common law or business trust, etc.) |
| irst organized, formed or incorporated under the law | • |
| April 30, 2018 (date of organization, formation or incorporation) | , |
| . The name of the Florida Limited Liability Compa | ny as set forth in the attached Articles of Organization: |
| WENJO FLORIDA, LLC | |
| (Enter Name of Florida Limited Li | ability Company) |
| . If not effective on the date of filing, enter the effective date: Cannot be prior to date of receive date this document is filed by the Florida Department. | eipt or filed date nor more than 90 calendar days after |

5. The plan of conversion has been approved in accordance with all applicable statutes.

| Signed this 20 day of MAY | |
|---|--|
| Signature of Authorized Representative of Lim | |
| Signature of Authorized Representative: | Title: MANAGER |
| Signature(s) on behalf of Other Business Entity: | [See below for required signature(s)] |
| Signature: Anti-Eller | |
| Printed Name: JOHN F. ROMANO | Title: PARTNER |
| Signature: | |
| Signature: Printed Name: | Title: |
| | |
| Signature:Printed Name: | Title: |
| Signature: | |
| Signature: Printed Name: | Title: |
| Signature:Printed Name: | |
| Printed Name: | Title: |
| | |
| Signature: Printed Name: | Title: |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or | Officer. |
| If Directors or Officers have not been selected, an In- | corporator must sign. |
| If Florida General Partnership or Limited Liabili Signature of one General Partner. | ty Partnership: |
| If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners. | ty 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) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | NJO FLORIDA, LI | | | |
|--|--|---------------------------------------|---|--|
| (Must contain | in the words "Limited" | Liability Company, | "L.L.C.," or "LLC.") | |
| ARTICLE II - Address: | | | | |
| The mailing address and street add | dress of the principal o | ffice of the Limited | Liability Company is: | |
| <u>Principal</u> | Office Address: | | Mailing Address: | |
| 2800 N. Patrick Cir. | | same | e | |
| West Palm Beach, FL | 33406 | | | |
| ARTICLE III - Registered Agen | it, Registered Office, | & Registered Ager | nt's Signature: | |
| ARTICLE III - Registered Agen The Limited Liability Company of mother business entity with an act The name and the Florida street ad | annot serve as its own tive Florida registratio ddress of the registered | Registered Agent. n.) | nt's Signature: You must designate an individu | 2019 JU SECRE TALI |
| The Limited Liability Company canother business entity with an act | annot serve as its own tive Florida registratio | Registered Agent. n.) | nt's Signature: You must designate an individu | 2019 JU SECRE TALI |
| The Limited Liability Company canother business entity with an act | annot serve as its own tive Florida registratio ddress of the registered | Registered Agent. n.) agent are: | nt's Signature: You must designate an individu | 2019 JU SECRE TALI |
| The Limited Liability Company canother business entity with an act | annot serve as its own tive Florida registration dress of the registered John F. Romano | Registered Agent. n.) agent are: Name | You must designate an individu | 2019 JUL 22 AM SECRETARY OF TALLAHASSE |
| The Limited Liability Company canother business entity with an act | annot serve as its own tive Florida registration dress of the registered John F. Romano 2800 N. Patrick Cir. | Registered Agent. n.) agent are: Name | You must designate an individu | 2019 JUL 22 SECRETARY TALLAHAS |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

constitutes a third degree felony as provided for in s.817.155, F.S.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Typed or printed name of signee

Filing Fees:

John Romano, Manager

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

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

Name and Address:

2800 N. Patrick Cir.

John Romano

ARTICLE IV-

"MGR" = Manager

MGR

<u>Title:</u>
"AMBR" = Authorized Member