

L19000219977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

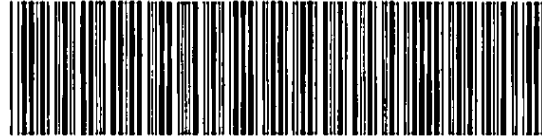
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/25/19--01001--021 ++43.75

05/28/19--01011--031 ++108.25

N SAMS

SEP 09 2019

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SECRETARY OF STATE
TALLAHASSEE, FL 32399



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2019

GINNY STUBBLEFIELD
175 2ND ST S PH 08
ST PETERSBURG, FL 33701 US

SUBJECT: JNG VENTURES, LLC
Ref. Number: W19000075250

You failed to make the correction(s) requested in our previous letter.

We have received your document for JNG VENTURES, LLC and check(s) totaling \$43.75 of which \$43.75 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$106.25 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

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.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 919A00016783

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CLERK OF COURT
JANET L. HARRIS, CLERK

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Nutrition & Health Management, Inc.
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Ginny Stubblefield
(Contact Person)

(Firm/Company)

175 2nd St. S. #PH-08
(Address)

St. Petersburg FL 33701
(City, State and Zip Code)

gigist827@gmail.com
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Ginny Stubblefield at (727) 365-8778
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☒ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$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

STREET ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

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:

Nutrition + Health Management, Inc.
(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LLC - Limited Liability Corp
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on June 1st, 2005
(Date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

JnG Ventures, LLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: January 1st, 2019
(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.

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TALLAHASSEE, FLORIDA

Sign this 20 day of March 20 19

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Garry Stubblefield
Printed Name: Garry Stubblefield Title: Managing member

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: Garry Stubblefield
Printed Name: Garry Stubblefield Title: President

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
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 Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized 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)

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J.N.G. Ventures LLC

Must contain the words "Limited Liability Company," "L.L.C.," or "LLC."

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

175 2nd St S #PH-08
St. Petersburg FL
33701

Mailing Address:

175 2nd St S #PH-08
St. Petersburg FL
33701

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Clint Stubblefield
Name

175 2nd St S #PH-08
Florida street address (P.O. Box **NOT** acceptable)

St. Petersburg FL 33701
City Zip

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..

Clint Stubblefield
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = ~~Authorized Member~~

"MGR" = ~~Member~~

AMBR - MGR

Name and Address:

Ginny Stubblefield
175 2nd St. S. # PH-08
St Petersburg FL 33701

(See instructions if necessary.)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

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

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.

Ginny Stubblefield
Typed or printed name of signer

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)

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TALLAHASSEE, FLORIDA