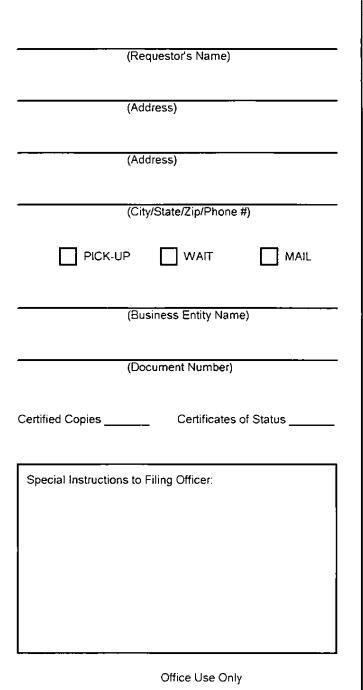
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SECRETARY OF STATE
TALLAHASSEE, FL

N CULLIGAN APR 2 9 2020

• •	COVER LI	ETTER,		
TO: New Filing Section Division of Corporations		• •		
SUBJECT: Jonathan Joseph White, Inc.				
	Resulting Florida Lim	nited Compa	ny)	-
The enclosed Articles of Conversion, A Business Entity" into a "Florida Limited				
Please return all correspondence concer	ning this matter to:	:		
Jonathan White				
(Contact Person)	 -			
Jonathan Joseph White, Inc.				
(Firm/Company)				
147 Alhambra Circle Suite 140				
(Address)				
Coral Gables, FL 33134				
(City. State and Zip Coo	de)	_		
jonathanwhite05@gmail.com				
E-mail Address: (to be used for future annua	al report notifications)			
For further information concerning this	matter, please call:			
Jonathan White	at (⁷⁸⁶	709-095	2	
(Name of Contact Person)		e) (Daytim	e Telephone Number)	_
Enclosed is a check for the following ar dollars and drawn on a bank located in t		processed	by this office must l	be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ■ \$155.00 Filing Fee and Certificate of Status	es	ъру С	3\$185.00 Filing Fees, Pertified Copy, and Pertificate of Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division The Cen	ddress: ng Section of Corporations tre of Tallahassee Monroe Street, Suite	· 810
Latinitation of the Depth		271211	momor succe suit	. 010

Tallahassee, FL 32303

FILED

Articles of Conversion For

"Other Business Entity"

Into

SECRETARY OF STATE TALLAHASSEE, FL

2020 APR 27 PM 1: 18

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: Jonathan Joseph White, Inc.
(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
(Enter state, or if a non-U.S. entity, the name of the country)
3/20/2020 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:
Jonathan Joseph White, 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 Zo day of APCII	_20 <u>_20</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: John Hon Joseph White	Title: MGL
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
	• • • • • • • • • • • • • • • • • • • •
Signature: Printed Name Tonathan Joseph white	Title: 7
Trince Ivania. The Indian Cose in Chine	_ nuc
Signature:	
Signature: Printed Name:	Title:
Signature	
Signature: Printed Name:	Title:
Signature:Printed Name:	and I
Printed Name:	Infle:
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title
Timed (value)	True.
If Florida Corporation:	
Signature of Chairman. Vice Chairman. Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	"
If Florida I imited Dones, white out the 2.1 (1.19)	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of <u>14432</u> General Farthers.	
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)

Jonathan Joseph White, LLC		· · · · · · · · · · · · · · · · · · ·
(Must contain the words "Limite	ed Liability Company, "L.L.C.," or "LLC,")	
ARTICLE II - Address:		
The mailing address and street address of	of the principal office of the Limited I	Liability Company is:
Principal Office Address: Mailing Address:		
147 Alhambra Circle Suite 140	147 Alhambra Circle Suite 140)
Coral Gables, FL 33134	Coral Gables, FL 33134	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an indi	vidual or another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	own Registered Agent. You must designate an indi of the registered agent are:	vidual or another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an indi	vidual or another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an indi of the registered agent are: te Name	Vidual or another SECRETARY OF TALLAHASSE
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address Jonathan Joseph White 147 Alhambra Circle S	own Registered Agent. You must designate an indi of the registered agent are: te Name	vidual or another
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address Jonathan Joseph White 147 Alhambra Circle S	own Registered Agent. You must designate an indi of the registered agent are: te Name Suite 140	Vidual or another SECRETARY OF STA TALLAHASSEE, FI

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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)

ARTICLE IV-

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

$"AABDD" = A \dots Albuming A A \dots Albuming A A A A A A A A A A A A A A A A A A A$	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Jonathan Joseph White	
	147 Alhambra Circle Suite 140	
	Coral Gables, FL 33134	
		
		
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ICLE V: Other provisions, if any. REQUIRED SIGNATURE:		
		——————————————————————————————————————
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member	
REQUIRED SIGNATURE: Signature of a member or Phis document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aw	are that
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document is a document in a docum	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aw ment to the Department of State constitutes a third degre	are that
REQUIRED SIGNATURE: Signature of a member or Phis document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aw	are that

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)