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(Re	questor's Name)	
		
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TATE CALLS AND TATE C

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COVER LETTER

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TO: New Filing S Division of C		٠		
SUBJECT: JBM Inte	mational LLC			
	(Name of Res	ulting Florida Limite	d Com	pany)
		-		d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:		
Jennifer Ersfjord				
	(Contact Person)			
JBM International LLC				
	(Firm/Company)			
3935 NW 36th Street				
	(Address)			
Gainesville, FL 32605				
(1	City, State and Zip Code)			
finance@jbminternatio	nal.com			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this mat	tter, please call:		
Jennifer Ersfjord		at (⁶¹⁹	522 4	883
(Name of Conta	ict Person)	_ \/	(Dayı	time Telephone Number)
	or the following amou a bank located in the	•	ocess	ed 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	□S180.00 Filing I and Certified Copy		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add	ress:	<u> </u>	Street	Address:

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

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: JBM International LLE JEE International LLE
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Corporation (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)
(Enter state, or if a non-U.S. entity, the name of the country)
10-8-2018 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:
JEM International LLC JEE International 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.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

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

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

Signed this 5th day of March	_20 <u>&0</u>		
Signature of Authorized Representative of Limited Liability Company:			
Signature of Authorized Representative: Jewil Printed Name: Jennifer Ersfjord	Title: Chief Financial Officer		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)		
Signature:			
Printed Name: Erik Ersfjord	Title: Chief Executive Officer		
Simputure.			
Signature:Printed Name:	Title:		
Signatura			
Signature: Printed Name:	_ Title:		
Signature: Printed Name:	Title:		
Signature:Printed Name:	Title:		
Signature: Printed Name:	Title:		
Timed Ivanie	The.		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer		
If Directors or Officers have not been selected, an Inc			
If Florida Compand Doman probing on Limited Linkship			
If Florida General Partnership or Limited Liability Signature of one General Partner.	ry rarmersnip:		
If Placed and Control Danks and the Control of the	to I to land De la contitu		
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ly Limited Partnersnip:		
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

arreas or one. I have a		
ARTICLE I - Name: The name of the Limited Liability Company i	is:	
JEM International LLG JEE In lev (Must contain the words "Limited Liab	mational LLC pility 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:	Mailing Address:	
3935 NW 36TH STREET GAINESVILLE, FL 32605	3935 NW 36TH STREET GAINESVILLE, FL 32605	
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another me registered agent are: exporation Agents, INC.	
5575 S. Semoran Blvd.	Suite 36	
Florida street address (P	P.O. Box NOT acceptable)	
Orlando	FL 32822	
City	Zip	
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as Cheyenne to the proper accept the college of the college o	d to accept service of process for the above stated limit d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of the performance of my duties, and I am familiar with an registered agent as provided for in Chapter 605, F.S Moseley, Asst. Secretary on behalf States Corporation Agents, Inc. Signature (REQUIRED)	Cali

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	JENNIFER ERSFJORD
	3935 NW 36TH STREET
	GAINESVILLE, FL 32605
AMBR	ERIK ERSFJORD
	3935 NW 36TH STEET
	GAINESVILLE, FL 32605
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	.)
Signature of a member or	an authorized representative of a member
any false information submitted in a docu	e with section 605.0203 (1) (b), Florida Statutes. I am aware that iment to the Department of State constitutes a third degree felony
as provided for in s.817.155, F.S.	
Jennifer R Ers	tioro

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)