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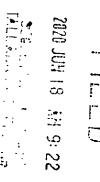
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

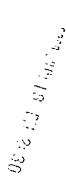
Office Use Only



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984.81.





Filing Cover Sheet

From: LESLIE SELLERS C/O Capitol Services, Inc.

Date: 6/18/2020

Trans#: 1130787

Entity Name JOHNSTON BOYS CONSULTING LLC (DC) CONVERTING INTO JOHNSTON 7

Articles Incorporation ()	Articles of Amendment ()
Articles of Dissolution ()	Annual Report ()
Conversion (XX)	Fictitious Name ()
Foreign Qualification ()	Limited Liability ()
Limited Partnership ()	Merger ()
Reinstatement ()	Withdrawal / Cancellation ()
Other ()	

STATE FEES PREPAID WITH CHECK #1833 FOR \$180.00

PLEASE RETURN:

Good Standing () Certificate of Fact ()

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.

I. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Johnston Boys Consulting LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(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)
March 20, 2017 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Johnston Boys Consulting 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 17 the day of June	20_20
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative:	- ///
Printed Name: Thomas Johnston	Title: Member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	
Printed Name: Thomas Johnston	Title: Member
Signature:Printed Name:	701.1
Printed Name:	_ l'itle:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	ar.a
Printed Name:	_ little:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Printed Name:	_ ritic.
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	
•	
If Florida Limited Partnership or Limited Liability	y 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na The name of the I	me: .imited Liability Compa	any is:
Johnston Boys Cor	nsulting LLC	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - A The mailing addre		the principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
911 Wood Creek D	rive	911 Wood Creek Drive
Melbourne, FL 329	901	Melbourne, FL 32901
business entity with an	active Florida registration.)	of the registered agent are:
		Name
	911 Wood Creek Drive	
	Florida street addres	ss (P.O. Box <u>NOT</u> acceptable)
	Melbourne	FL 32901
	City	Zip
liability com	pany at the place design	t and to accept service of process for the above stated limited nated in this certificate, I hereby accept the appointment as a capacity. I further agree to comply with the provisions of all

ıll 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)

<u> Fitle:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	
AMBR	Thomas Johnston
	911 Wood Creek Drive
	Melbourne, FL 32901
	
(Use attachment if necessary)	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
LE V: Other provisions, if any.	
(Use attachment if necessary) LE V: Other provisions, if any. REQUIRED SIGNATURE:	The state of the s
LE V: Other provisions, if any. REQUIRED SIGNATURE:	Nand
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	r an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am aware cument to the Department of State constitutes a third degree for
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	ce with section 605.0203 (1) (b), Florida Statutes, I am aware
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document any false information submitted in a document in a d	ce with section 605.0203 (1) (b), Florida Statutes, I am aware

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

ARTICLE IV-