# L20000378682

(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:





400355579214

12/01/20--01018--038 \*\*185.00

20 DEC -1 AM 9: 31

D O'KEEFE
DEC 11 2020

### **COVER LETTER**

TO:	New Filing Son Division of C					
SUR	JECT:	JTF MANAGE	EMENT	LLC		
000		(Name of Res	ulting F	lorida Limite	ed Com	pany)
						d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	e return all corr	espondence concerning	g this n	natter to:		
THO	MAS E FRANCO					
		(Contact Person)				
		(Firm/Company)				
9841	NW 35th Street					
		(Address)				
Hollyv	vood FL 33024					
	((	City, State and Zip Code)		•		
tomm	y@tefrestaurants	s.com				
E-1	mail Address: (to b	e used for future annual re	port noti	fications)		
For fu	urther informati	on concerning this ma	tter, ple	ease call:		
MARG	C A MICELI, E.A.		at (	954	651	1-0097
	(Name of Conta	ict Person)		(Area Code)	(Day	time Telephone Number)
		for the following amount a bank located in the			rocess	ed by this office must be payable in US
(\$25 fd & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	\$155.00 Filing Fees and Certificate of Status		80.00 Filing ertified Cop		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S					Address: Filing Section
	Division of C					on of Corporations
	P.O. Box 632	-				entre of Tallahassee
	Tallahassee.	FL 32314			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 <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:  JTF MANAGEMENT INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of FLORIDA  (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)
10/02/1998
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:
JTF MANAGEMENT LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: December   2020 (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 24th day of NOVEMBER	20_20	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative:	in fine	
Printed Name: THOMAS E FRANCO	_ Title: AMBR / MGR	-
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]	
Signature: h fm		
Printed Name: THOMAS E FRANCO	Title: PRESIDENT / CEO	<u>-</u>
Signature: Signature:		_
Printed Name: JOSEPH FRANCO	Title: SECRETARY / TREASURER	_
Signature:		
Signature:Printed Name:	Title:	<u>-</u>
Signature:		
Printed Name:	_ Title:	- -
Constunct		
Signature:Printed Name:	_ Title:	_
Signature:Printed Name:	Title	_
Timed Name.	Title.	<del>-</del>
If Florida Corporation:	o er	
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		
If Directors of Officers have not been selected, an inc	corporator must sign.	
If Florida General Partnership or Limited Liabilit	ty Partnership:	
Signature of one General Partner.		ALESSET T
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	20 DEC -1
		#SS -
All others: Signature of an authorized person.		
Signature of an aumorized person.		
<u>Fees:</u>		AH 9: 31
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 1 - Name: The name of the Limited Liability Comp	pany is:			
JTF MANAGE	MENT LLC			
(Must contain the words "Limite		ompany, "l.	.L.C" or "LLC	2.")
ARTICLE II - Address: The mailing address and street address of	of the princ	ipal offi	ce of the Li	mited Liability Company is:
Principal Office Address:	<u> </u>	Mailing .	Address:	
9841 NW 35th St. Hollywood FL 33024				
		·····		
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	own Registered	i Agent. Yo	ou must designa	l Agent's Signature: ate an individual or another
THOMAS	S E FRANCO	0		
	Name			<del></del>
9841 N	W 35th Stree	et		
Florida street addre	ess (P.O. B	ox <u>NOT</u>	acceptable	)
HOLLYWOO	)D	FL	33024	
City			Zip	
Having been named as registered age liability company at the place desig registered agent and agree to act in the statutes relating to the proper and co accept the obligations of my position  Registered Agen	mated in the is capacity. complete per con as regist	is certific I furthe formance dred age	cate, I hereb r agree to c e of my duti ent as provid	oy accept the appointment as omply with the provisions of all es, and I am familiar with and
l (C	/ Ontinue	E <b>D</b> )		20 DEC -1 AM

#### **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 / MGR	THOMAS E FRANCO	
	9841 NW 35th St.	
	HOLLYWOOD, FL 33024	
AMBR	JOSEPH FRANCO	
AIVIDA	442 Alamanda Drive	
	Hallandale, FL 33009	
	Tidilatidate, 1 E 00000	
<del> </del>		
	<u> </u>	ა ე
		7
		ب
		<del>'-</del>
		<b>&gt;</b> -
	•	
(Use attachment if necessary)		က <b>ယ</b>
	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
DELCT D. V. O.I.	•	
RTICLE V: Other provisions, if any. HOMAS E FRANCO IS 50% OWNER / PARTNE	in .	
OSEPH FRANCO IS 50% OWNER / PARTNER	:n	
O OWNERSHIP INTEREST HAS CHANGED FF	POM CORPORATION TO LLC	
O OWNERSHIP INTEREST HAS CHANGED FR	TOM CONFORMION TO LLC	
DEOPHDED SIGNATION		
<u>reovired</u> signature: /		
12		
Sidnatura of a marker or a	n authorized representative of a member	
This document is executed in accordance v	with section 605.0203 (1) (b). Florida Statutes, I am aware th	181
any false information submitted in a docum as provided for in s.817.155, F.S.	ient to the Department of State constitutes a third degree felo	ny
THOMAS E FRANC	OO	
	ped 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)