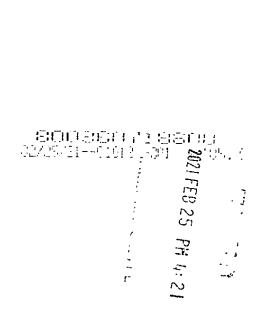
L210000 B1444

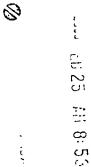
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
☐ ≥CK-U-	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	to Filing Officer
s.	

Office Use Only



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COVER LETTER

TO:	New Filing Se Division of Co			
		rsai design associa	TES, LLC	
SUBJ	ECT:	(Name of Res	ulting Florida Limited Co	mpany)
The e Busir	nclosed Articles	s of Conversion, Articl a "Florida Limited Li	es of Organization, a ability Company" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Pleas	e return all corro	espondence concerning	g this matter to:	
DENN	IIS JANSON			
		(Contact Person)	·	
JANS	ON TSAFDESIGN	ASSOCIATES, LLC		
		(Firm/Company)		
# 3319	962 3191 GRA1	ND AVENUE		
		(Address)		
MIAN	41, FL 33133			
-	((City, State and Zip Code)		
DENI	NE TROSPAL SON	AIDESIGN.COM		
E-	mail Address: (to b	e used for future annual re	port notifications)	
For f	urther information	on concerning this ma	tter, please call:	
DEN	NIS JANSON		at (917)952	1115
	(Name of Conta	et Person)	(Area Code) (Da	aytime Telephone Number)
Enclo dolla	osed is a check f rs and drawn on	or the following amou a bank located in the	int: (All checks proce United States)	ssed by this office must be payable in US
(\$25 f	50.00 Filing Fees for Conversion 5 for Articles ganization)	☐\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
New Divis Clifte 2661	EET ADDRESS Filing Section Sion of Corporat on Building Executive Cent shassee, FL 323	ions er Circle	New Filing	Corporations 327

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: JANSON TSAI DESIGN ASSOCIATES, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
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
OCTOBER 14, 2009
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
JANSON TSAI DESIGN ASSOCIATES, 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.)
<u>Note:</u> 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.



orginod timo zerre dag or zew capital and	2V <u>.:></u>
Signature of Authorized Representative of Limite	ed Liability Company:
Signature of Authorized Representative:	mi kama
Dipliatare of traditional property	Title! MGR/AUTHORIZED MEMBER
Printed Name: DENNIS C. JANSON	Title: MICHON HORRELD STEADER
Signature(s) on behalf of Other Business Entity: [S	ce below for required signature(s)
Signature: Domin's formor	
Printed Name: DENNIS C. JANSON	Title: MGR/AUTORIZED MEMBER
Signature: Jord M James	
Printed Name: BONITA M/JANSON	Title: MANAGER
U	
Signature:	- Pro. 4
Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Trined rame.	
Signature:	
Printed Name:	_ Title:
	•
Signature:	(0.1
Printed Name:	_ little:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer. orporator must sign.
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	·
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	•
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	S5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Mi	ast contain the words "Limited Lie	bility Company, "L.L.C.," or "LLC.")	 -	
ARTICLE II - Ac	ddress: ss and street address of th	e principal office of the Limited	Liability Compan	ıy is:
Principal Office /	Address:	Mailing Address:		
SUITE 830 2423 S V	V 1470H STREET	PO BOX 331962		
		MIAMI, FL 33133		
ARTICLE III - R	Registered Agent, Registe company cannot serve as its own Re active Florida registration.)	ered Office, & Registered Agen egistered Agent. You must designate an inc	dividual or another	
ARTICLE III - R The Limited Liability C business entity with an	Company cannot serve as its own Reactive Florida registration.) Florida street address of t	ered Office, & Registered Agen egistered Agent. You must designate an inc the registered agent are:	dividual or another	,
The Limited Liability C business entity with an	Company cannot serve as its own Reactive Florida registration.) Florida street address of the NORTHWEST REGISTERIAL CONTRACTOR CONT	ered Office, & Registered Agen egistered Agent. You must designate an inc the registered agent are:	dividual or another	
ARTICLE III - R The Limited Liability C business entity with an	Company cannot serve as its own Reactive Florida registration.) Florida street address of the NORTHWEST REGISTERIAL CONTRACTOR CONT	ered Office, & Registered Agent egistered Agent. You must designate an income the registered agent are:	dividual or another	J.
ARTICLE III - R The Limited Liability C business entity with an	Company cannot serve as its own Reactive Florida registration.) Florida street address of the NORTHWEST REGISTERS NORTHWEST NORTHWEST NORTHWEST. NORTHWES	ered Office, & Registered Agent egistered Agent. You must designate an income the registered agent are:	dividual or another 2021 FEB 25 PH 1;	
ARTICLE III - R The Limited Liability C business entity with an	Company cannot serve as its own Reactive Florida registration.) Florida street address of the NORTHWEST REGISTERS NORTHWEST NORTHWEST NORTHWEST. NORTHWES	ered Office, & Registered Agen egistered Agent. You must designate an inche registered agent are: ED AGENT anne	dividual or another	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 605. F.S..

Title:	Name and Address:
"AMBR" = Authorized Member	
"M()R" = Manager	DENNIS C. JANSON AMBR
	#331962 3191 GRAND AVENUE
	MIAMI, FL 33133
	BONITA M. JANSON MGR
	3400 SW 27TH AVENUE APT, 806
	MIAML FL 33133
<u></u>	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	

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.

DENNIS C. JANSON

Typed or printed name of signce

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)