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(Re	equestor's Name)	•
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Dc	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: New Filing Section		
Division of Corporations		
SUBJECT: JCommerce 18, LLC		
(Name of Re	esulting Florida Limi	mited Company)
The enclosed Articles of Conversion, Arti Business Entity" into a "Florida Limited I	cles of Organizat Liability Compan	ation, and fees are submitted to convert an "Othony" in accordance with s. 605.1045, F.S.
Please return all correspondence concerni	ng this matter to:):
Kiara Rozas		
(Contact Person)		
GBS Group		
(Firm/Company)		
3350 SW 148th Ave. Suite 120		
(Address)		_
Miramar, FL 33027		
(City, State and Zip Code)	-	_
jharatz@gmail.com		
E-mail Address: (to be used for future annual r	eport notifications))
For further information concerning this ma	atter, please call:	1:
Kiara Rozas	at (954	_չ 659-8835
(Name of Contact Person)		de) (Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the		s processed 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	\$180.00 Filing and Certified Cop	5
Mailing Address:		Street Address:
New Filing Section		New Filing Section
Division of Corporations		Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
1 WIIWIIWIJOOO, 1 LJ J4J T		4710 M. MICHIC SHEEL, SHILL OID

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.

J. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: JCommerce, 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)
October 5th, 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:
JCommerce 18, 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.

21 JUN 18 PM 12: \$
SCUNDAR OF STATE
ALL ARCSSER FROM

Signed this 14th day of June	2021
Signature of Authorized Representativ	ve of Limited Liability Company:
Signature of Authorized Representative: Printed Name: Jose Haratz	Title: Manager
	s Entity: [See below for required signature(s)]
Signature:	(**************************************
Printed Name: Jose Haratz	Title: Manager
Signature:	Th' 1
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	0.07
Signature of Chairman, Vice Chairman, Di If Directors or Officers have not been selec	
If Florida General Partnership or Limite Signature of one General Partner.	ed Liability Partnership:
If Florida Limited Partnership or Limite Signatures of ALL General Partners.	ed Liability Limited Partnership:
All others: Signature of an authorized person.	

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Fees:

Certified Copy: \$30.00 (Optional) \$5.00 (Optional) Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

in ice is on c	MOANZAHOMON	T BONDA LIMITED DIAD	METT COMPANT
ARTICLE I - Nat The name of the L	me: imited Liability Company	y is:	
JCommerce 18, LLC			
(Mi	ust contain the words "Limited Li	ability Company, "L.I.,C.," or "LLC.")	
ARTICLE II - Ac		e principal office of the Limited	1 Liability Company is:
Principal Office A	Address:	Mailing Address:	
15805 Biscayne Blv		15805 Biscayne Blvd. Suite	315
North Miami Beach,	FL 33160	North Miami Beach, FL 331	60
The name and the	15805 Biscayne Blvd. Sui	te 315 P.O. Box <u>NOT</u> acceptable)	
	North Miami Beach	FL 33160	
	City	Zip	
liability comp registered agent statutes relating	any at the place designate and agree to act in this ca g to the proper and compl	nd to accept service of process for ed in this certificate, I hereby acc pacity. I further agree to comply ete performance of my duties, and s registered agent as provided for	ept the appointment as wwith the provisions of all d I am familiar with and
	JOSE HARATZ		
	Registered Agent's	Signature (REQUIRED)	\$ 0 N
	(CONT	TINUED)	TTLAHASS

A	ĸ	TI	CI	.E	IV-

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

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager MGR	Jose Haratz		
	15805 Biscayne Blvd. Suite 315		
	North Miami Beach, FL 33160		_
			
-			
			
		70 m C7	_,
			
(Use attachment if necessary)		2.7	
Ose attachment if necessary)		经主	·
			
LE V: Other provisions, if any.			i
		<u> </u>	
		الدر — الد	_
			_
<u>REQUIRED</u> SIGNATURE:			
JOSE H	HRATZ		
			_
Signature of a member or :	an authorized representative of a memb	er	
This document is executed in accordance any false information submitted in a document	with section 605.0203 (1) (b), Florida Statutes, I ar nent to the Department of State constitutes a third c	m aware degree '	e ti fel
as provided for in s.817.155, F.S.	ion to the Department of State Constitutes a filling C	acgree i	CI
Jose Haratz			
Туј	oed or printed name of signee Filing Fees		_



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JCOMMERCE LLC" IS DULY FORMED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE THIRTEENTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JCOMMERCE LLC"

WAS FORMED ON THE FIFTH DAY OF OCTOBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

SCO.

Authentication: 203198987

Date: 05-13-21