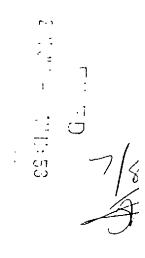


(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	





07/07/21--01026--010 **2035.00



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 Article: Stony Lone Some Group Jump tuit Invastors L (Enter Name of Other Business Entity)	s of Conversion is:
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.)
First organized, formed or incorporated under the laws of Connection (Enter state, or if a non-U.S. entity, the n	ame of the country)
on \(\frac{1}{31} \rightarrow 015\) (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	
Stony Lonesome Gronp Jump + uit Furdstors (Enter Name of Florida Limited Liability Company)	LLC
4. If not effective on the date of filing, enter the effective date: Filing dete. (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 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 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 appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	I rights the amount to

Signed this 23 day of June	20_21	
Signature of Authorized Representative of Limi		
Signature of Authorized Representative: Are Printed Name: Sean D OCAKE	n D Realic Title: Managing Member	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]	
Signature: Sean D Drake	1/0	_
Printed Name: Sean D Drake	Title:	AT .
Signature:Printed Name:		
Printed Name:	Title:	
Signature:		
Signature: Printed Name:	Title:	
Signature:		
Signature: Printed Name:	Title:	
Signature:		
Signature:Printed Name:		
Signature:		
Signature: Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	corporator must sign.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnersnip:	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
Foes:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) \$\frac{1}{3}\$ \(\sigma \sigm	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Stony Lonesome Grou (Must contain the words "Limited Liability	p Jump tuit Investors LLC y Company, "L.L.C." or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5001 Bridge # St Unit 1413 Tampa FL 33611	Same
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	registered agent are:
Scot Bridge 5+ Florida street address (P.O.	- Unit 1413 . Box <u>NOT</u> acceptable)
Tampa	FL33611 Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	o accept service of process for the above stated limited this certificate. I hereby accept the appointment as ity. I further agree to comply with the provisions of alterformance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S
Jen D	Amhr
Registered Agent's Sign	nature (REQUIRED)

(CONTINUED)

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

0.5.445750 4 .1 1 1.5.4	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Sean Drake Sooi Bridge St Unit 1413 Tampa FL 33611
	Soci Bridge St Unit 1413
	Tampa FL 33611
	·
	
Use attachment if necessary)	
Use attachment if necessary)	
Use attachment if necessary) LE V: Other provisions, if any.	
·	
LE V: Other provisions, if any.	
E V: Other provisions, if any. REQUIRED SIGNATURE:	W. A.
LE V: Other provisions, if any.	Mahr
REQUIRED SIGNATURE:	·
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or: This document is executed in accordance any false information submitted in a document.	·
Signature of a member or: This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware the nent to the Department of State constitutes a third degree felor
Signature of a member or: This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felor
Signature of a member or: This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware the nent to the Department of State constitutes a third degree felor