# 21000366489

(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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D O'KEEFF AUG 17, 2021

W21-95241



### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 1, 2021

ZEV STERN ZS MANAGEMENT LLC 3850 S. UNIVERSITY DRIVE, #292844 DAVIE, FL 33329

SUBJECT: ZS MANAGEMENT LLC

Ref. Number: W21000095241

We have received your document for ZS MANAGEMENT LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L15000081300.

Please complete the marked sections in the Articles of Conversion. A signature is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 421A00015190

2: 5**8** 

www.sunbiz.org

### **COVER LETTER**

Division of C					
SUBJECT: ZS Mana	angement Company LLC	;			
SOBJECT.	(Name of Res	ultin	g Florida Limit	ed Com	pany)
					d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g thi	s matter to:		
Zev Stern					
	(Contact Person)				
ZS Management Com	pany LLC				
	(Firm/Company)				
3850 S. University Driv	/e, # 292844				
	(Address)			•	
Davie, FL 333329					
{(	City, State and Zip Code)			•	
zev@wolfstargroup.co	m				
E-mail Address: (to b	e used for future annual re	port i	notifications)		
For further informati	on concerning this ma	iter.	please call:		
Zev Stern		at	(609	577-9	977
(Name of Conta	ict Person)	_	(Area Code)	(Dayt	time Telephone Number)
	or the following amous a bank located in the		•	rocess	ed 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 d Certified Cop		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327				New F Division	Address: Filing Section on of Corporations entre of Tallahassee
Tallahassee, I	FL 32314			2415 N	N. Monroe Street, Suite 810

Tallahassee, FL 32303

### 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: ZS Management LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
11/26/13 on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ZS Management Company 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 JUL 23 FH 12: 43

Signed this 15th day of sage Tuly	_ 20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:Printed Name: Zev Stern	Title: Manager/ Owner
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name: Zev Stern	Title: Manager/Owner
Timed Name. 200 otom	Title.
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	Tial
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Company LLC	bility Company, "L.L.C.," or "L.L.C.")	
(.,	viusi comain the words. Emmed Em	omy company. Table. or Table.	
ARTICLE II - A	Address:		
The mailing addr	ess and street address of the	e principal office of the Limited	Liability Company is
Principal Office	Address:	Mailing Address:	
3850 S. University	<sup>,</sup> Drive	3850 S. University Drive	
#292844	<del></del>	#292844	
Davie, FL 33329		Dla EL 22220	<del></del>
ARTICLE III - The Limited Liability business entity with a		Davie, FL 33329  red Office, & Registered Agen egistered Agent. You must designate an in	dividual or another
ARTICLE III - The Limited Liability business entity with a	Company cannot serve as its own R in active Florida registration.)	red Office, & Registered Ager egistered Agent, You must designate an in	dividual or another
ARTICLE III - The Limited Liability business entity with a	Company cannot serve as its own Run active Florida registration.)  e Florida street address of the Zev Stern	red Office, & Registered Ager egistered Agent, You must designate an in	dividual or another  21 JUL 23
ARTICLE III - The Limited Liability business entity with a	Company cannot serve as its own Run active Florida registration.)  e Florida street address of the Zev Stern	red Office, & Registered Ager egistered Agent. You must designate an in ne registered agent are:	dividual or another  21 JUL 23
ARTICLE III - (The Limited Liability business entity with a	Company cannot serve as its own Ren active Florida registration.)  e Florida street address of the Zev Stern  Na  4169 N 42nd Terrace	red Office, & Registered Ager egistered Agent. You must designate an in ne registered agent are:	dividual or another  21 JUL 23
ARTICLE III - The Limited Liability business entity with a	Company cannot serve as its own Ren active Florida registration.)  e Florida street address of the Zev Stern  Na  4169 N 42nd Terrace	red Office, & Registered Ager egistered Agent. You must designate an in ne registered agent are:	dividual or another

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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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		
AMBR & MGR	Zev Stern	
<del></del>	4169 N 42nd Terrace	_
	Hollywood, FL 33021	_
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<del></del>		_
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(Use attachment if necessary)	Til 🛖	
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	<u> </u>	<del>,</del>
ARTICLE V: Other provisions, if any.	Sap. <b>13</b>	
Federal EIN: 46-4194802	$\sim$	
REQUIRED SIGNATURE:		
<del>_</del>		
	(	_
Signature of a member or	an authorized representative of a member	
	e with section 605.0203 (1) (b), Florida Statutes. I am aware	that
Signature of a member or a	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fe	

as provided for in s.817.155, F.S.

Zev Stern

Typed 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)