# 177000000107

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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#### COVER LETTER

Division of Corporations		
SUBJECT: JGC   Inc		
(Name of	Resulting Florida Limited	i Company)
The enclosed Articles of Conversion, A Business Entity" into a "Florida Limited		n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all correspondence concer	ming this matter to:	
James Ciaccio		
(Contact Person)		
JGC I Inc		
(Firm/Company)		
707 Argyle Place		
(Address)		
(City, State and Zip Coo	de)	
Temple Terrace, FL 33617		
E-mail Address: (to be used for future annu	al report notifications)	
For further information concerning this	matter, please call:	
Patsy Ciaccio	at ( <sup>813</sup> )	335-2409
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following as dollars and drawn on a bank located in	• -	ocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\$155.00 Filing Fee and Certificate of Status	ees \$180.00 Filing F and Certified Copy	<del>-</del>
Mailing Address: New Filing Section Division of Corporations	<u>.</u> I	Street Address: New Filing Section Division of Corporations
P.O. Box 6327	7	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

#### **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 JGC I Inc	of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, common la	aw or business trust, etc.
First organized, formed or incorporated under the laws of	
(Effici state, of it a non-o.s. entity, the nat	me of the country)
08/04/2003 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Article	s of Organization:
JGC I 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 c the date this document is filed by the Florida Department of State.)	alendar days-after
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill not be listed as the
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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	rights the amount to
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	Signed this 22 day of December 2021	20			
	Signature of Authorized Representative of Limited Liability Company:				
	Signature of Authorized Representative: Printed Name: James Ciaccio	Title: President			
Signature(s) op behalf of Other/Business Entity:  See below for required signature(s)   Signature: Title: Manager					
	Signature: Printed Name: James Ciacio	Title: Manager			
	Signature:				
	Printed Name:	Title:			
	Signature: Printed Name:	Title:			
	Signature:Printed Name:	Title:			
	Signature:Printed Name:	Title:			
	Signature:Printed Name:	Title:			
	If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or O If Directors or Officers have not been selected, an Inco				
	If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:			
	If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	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)			

## AŔTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
JGC I LLC  (Must contain the words "Limited I	Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the mailing address and street address.	the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
707 Argyle Place Temple Terrace, FL 33617	707 Argyle Place Temple Terrace, FL 33617			
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	stered Office, & Registered Agent's Signature:  n Registered Agent. You must designate an individual or another  f the registered agent are:			
James Ciaccio	Nome			
	Name			
707 Argyle Place	(DO D NOT 111)			
Florida street address	s (P.O. Box NOT acceptable)			
Temple Terrace	FL 33617			
City	Zip			
liability company at the place designor registered agent and agree to act in this statutes relating to the proper and com accept the obligations of my position	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all aplete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S			

(CONTINUED)

#### **ARTICLE IV-**

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

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager MGR	James Ciaccio		
	707 Argyle Place		
	Temple Terrace, FL 33617		
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(Use attachment if necessary)	<u>'</u>		
	<u>:</u>		
LE V: Other provisions, if any.			
The victure provisions, it any.	;		
REQUIRED SIGNATUR₽:			
· · · · · · · · · · · · · · · · · · ·	*		
X and Gacci	'v		
• //			
$^{ u}$ 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 awar		
any talse information submitted in a docur as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree		
as provided for in s.817.155, 1.5.			
James Ciaccio			
$T_{\mathcal{Y}_{1}}$	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)