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(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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03/24/22--01013--002 **185.00



COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: JWB COMPANY I, LLC					
(Name of Res	sulting Florida Lin	nited Compa	nny)		
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li	_				
Please return all correspondence concernin	g this matter to	:			
FREDERICK G. WACKER, III					
(Contact Person)					
C/O PASQUESI SHEPPARD LLC				120	20
(Firm/Company)		<u> </u>		- n	127
585 BANK LANE, SUITE 3000				9	** · · · ·
(Address)					74 24
LAKE FOREST, IL 60045					FILED R 24 PM
(City, State and Zip Code)		_			<u>.</u>
RP@PS.CPA					07
E-mail Address: (to be used for future annual re	port notifications)	_		i.	
For further information concerning this ma	itter, please call	:			
L. ROBERT PASQUESI	_at (<mark>847</mark>	234-500	00, EXT 5400		
(Name of Contact Person)	at (e) (Daytir	ne Telephone Numbe	er)	
Enclosed is a check for the following amou dollars and drawn on a bank located in the	•	processed	d by this office me	ust be payab	le in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filinand Certified C	opy (■\$185.00 Filing Fee Certified Copy, and Certificate of Status	?s.	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New Fil Division The Cen 2415 N	Address: ling Section n of Corporations ntre of Tallahasse . Monroe Street, S ssee, FL 32303	e	

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 convertithe 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: J.W.B. COMPANY I, L.L.C.
(Enter Name of Other Business Entity)
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
on December 28, 2000 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization : JWB COMPANY 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 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.

\$5.00 (Optional)

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	I, LLC		
	(Must contain the words "Limited I.	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - The mailing add		he principal office of the Lim	ited Liability Company is:
Principal Offic	e Address:	Mailing Address:	
177 GOMEZ RD		585 BANK LANE, SUITE	
HOBE SOUND,	FL 33455	LAKE FOREST, IL 6004	5
-	he Florida street address of FREDERICK G. WACKE 177 GOMEZ RD		2022 HAR 24 F
		(P.O. Box NOT acceptable)	PR C
	HOBE SOUND	FL 33455	PH ID: 07
	City	Zip	9 9 9

(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:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	S S S S S S S S S S S S S S S S S S S
"MGR" = Manager AMBR	FREDERICK G. WACKER, III	
	585 BANK LANE, SUITE 3000 LAKE FOREST, IL 60045	1
(Use attachment if necessary)		
CLE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
This document is executed in accordance	an authorized representative of a with section 605.0203 (1) (b), Florida Statement to the Department of State constitutes	utes. I am aware tha
EBEDEBICK & WACKER III		

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)