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2022 APR 27 PM 1: 2

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WALK IN

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	I	PICK UP:	4/27 DANNY	
XX	CERTIFIED COPY	Y		
XX	CUS	GS		
XX	FILING	CON	VERSION	
	FS CAPITAL GRO			
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COVER LETTER

Division of C				
SUBJECT: JFS Cap	oital Group LLC			
		Sulting Florida L	imited Co	mpany)
		_		nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter t	0:	
Jarett Fein				
	(Contact Person)			
JFS Capital Group LL	С			
<u> </u>	(Firm/Company)			
1691 Michigan Avenue	e, Suite 445			
	(Address)			
Miami Beach, FL 3313	39			
	City. State and Zip Code)			
jfein@kvnational.com				
E-mail Address: (to b	e used for future annual re	port notification	s)	
For firsthan in formati	on on annual this	••	11.	
	on concerning this ma	-	11:	
Erica Calman	· 	_at (<u></u>) ⁶⁹⁵⁻	7937
(Name of Conta	act Person)	(Area Co	ide) (Daj	ytime Telephone Number)
	or the following amou a bank located in the			sed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fill and Certified 6		S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add	ress:		Stree	t Address:
New Filing S				Filing Section
Division of C				ion of Corporations
P.O. Box 632	7		The C	Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

FILED

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

2022 APR 27 PM 1: 28

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: JFS Capital Group 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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
03/21/2008 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: JFS Capital Group 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.

Signed this 26th day of April	_{20_} 22
Signature of Authorized Representative of I	imited Liability Company:
Signature of Authorized Representative	A Comment
Printed Name: Jarett Fein	Title: Manager/Authorized Member
Fillited ivalife. Oarett i en	Title: Manager/Authorized Methoes
Signature(s) on behalf of Other Rusiness Entit	e of Authorized Representative: ame: Jarett Fein Title: Manager/Authorized Member ame: Jarett Fein Title: Manager/Authorized Member ame: Jarett Fein Title: Manager/Authorized Member ame: Title: Manager/Authorized Member Title: Manager/Authorized Member Title: Manager/Authorized Member Title: Manager/Authorized Member Title: Title: Manager/Authorized Member Title: Manag
Signature:	
Printed Name: Jarett Fein	Title: Manager/Authorized Member
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Computing	
	or Officer
-	
if Directors of Officers have not been selected, an	i incorporator musi sign.
If Florida General Partnershin or Limited Lia	hility Partnership
Signature of one General Partner.	outer Tartite Ship.
5.5	
If Florida Limited Partnership or Limited Lia	bility Limited Partnershin:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
•	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization	n: \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

JFS Capital Gro				_	
	(Must contain the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")			
ARTICLE II The mailing ac		e principal office of the Limite	d Liability (Compa	iny is:
Principal Offi	ce Address:	Mailing Address:			
1691 Michigan Miami Beach, F	Avenue, Suite 445	1691 Michigan Avenue, Su Miami Beach, FL 33139	uite 445	_	
TYNGTH BCGGT, F	200103			<u>-</u>	
The name and	the Florida street address of t Posner Group LLC	he registered agent are:	46 SE	2027	
	N	ame	3: C. (************************************	2022 APR 2	
	1691 Michigan Avenue			27	A THE
	Florida street address (P.O. Box NOT acceptable)	38.5	PX	
	Miami Beach	33130	<u>~</u>		
	Miami beach	FL 33139			
	City	FL SS 109 Zip		ի։ 28	
liability c registered ag statutes rel	City n named as registered agent an company at the place designate gent and agree to act in this ca ating to the proper and comple	— · · · · · · · · · · · · · · · · · · ·	cept the appo ly with the pi nd I am fami	ointme rovisio liar wi	ent as ens of a eth and
liability c registered ag statutes rel	City named as registered agent an ompany at the place designate gent and agree to act in this caluting to the proper and complete obligations of my position as	Zip Indito accept service of process for this certificate, I hereby acceptainty. I further agree to complete performance of my duties, as	cept the appo ly with the pi nd I am fami	stated ointme rovisio liar wi	ent as ens of a eth and

(CONTINUED)

ARTICLE IV-

Jarett Fein

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR/MGR	Jarett Fein	
	1691 Michigan Avenue	
	Miami Beach, FL 33139	
		
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(Use attachment if necessary)	U)] (
(See all and meets and)	ياً .	
		25.
LE V: Other provisions, if any.	•	·
REQUIRED SIGNATURE:		
(7.		
, i		
Signature of a member or	an authorized representative of a member	٢
This document is executed in accordance	e with section 605.0203 (1) (b). Florida Statutes. I am a ment to the Department of State constitutes a third deg	2
provided for in s.817.155, F.S.		2, CC 1C

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)