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

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D. O'KEEFE JUN 2 1 2022



## COVER LETTER

Division of C	ection Torporations ,			•
JY&JL	LC			
SUBJECT:	(Name of Res	sulting Florida Limit	ted Con	npany)
		-		nd fees are submitted to convert an "Othe ecordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:		
Stephen Guerrero				
Guerrero Law Group F	(Contact Person) PLLC		-	
240 SW 8th Ave	(Firm/Company)		-	
Miami, FL 33130	(Address)		-	
sguerrero@theguerrer	City, State and Zip Code) olaw.com		-	
E-mail Address: (to b	be used for future annual re	port notifications)	_	
For further informati	on concerning this ma	tter, please call:		
Stephen Guerrero		954 at (	410-1	1037
(Name of Conta	act Person)	_ \	(Day	ytime Telephone Number)
	for the following amou a a bank located in the		roces	sed 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	S180.00 Filing and Certified Cop		☐S185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations 27		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee
Tallahassee,	FL 32314		2415	N. Monroe Street, Suite 810

Tallahassee, FL 32303

# **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 of Conversion is:  JY & J INC
(Enter Name of Other Business Entity)
Corporation
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Florida
First organized, formed or incorporated under the laws of
First organized, formed or incorporated under the laws of
on
On
JY & J 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.

SECRETARY OF STATE

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

JA & T FFC		
(Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited	l Liability Company is
Principal Office Address:	Mailing Address:	
20915 SW 208 ST	20915 SW 208 ST	
MIAMI, FL 33187	MIAMI, FL 33187	
ARTICLE III - Registered Agent, Regi		nt's Signature:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Age on Registered Agent. You must designate an in	ndividual or another
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Age on Registered Agent. You must designate an in	ndividual or another
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Age on Registered Agent. You must designate an in of the registered agent are:	ndividual or another
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)  The name and the Florida street address of	istered Office, & Registered Age on Registered Agent. You must designate an in of the registered agent are:	ndividual or another  2022 JUN - I SECULLAHASS
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)  The name and the Florida street address of	istered Office, & Registered Age on Registered Agent. You must designate an in of the registered agent are:  DUP PLLC  Name	FILE PH 2022 JUN - 1 PH SECRETARY OF TALLAHASSEE. F
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of GUERRERO LAW GRO	istered Office, & Registered Age on Registered Agent. You must designate an in of the registered agent are:  DUP PLLC  Name	FILE PH 2022 JUN - 1 PH SECRETARY OF TALLAHASSEE. F
The name and the Florida street address of GUERRERO LAW GRO	istered Office, & Registered Ages on Registered Agent. You must designate an in of the registered agent are: OUP PLLC Name	FILL SECULLARY FALLAHASSE

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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:
"MGR" = Manager	
AMBR	MEDEROS FARM HOLDING LLC
-	20975 SW 208 ST
	MIAMI, FL 33187
	-
	<del></del>
	<u></u>
(Use attachment if necessary)	SECRLIANASS
( =, ,	H. C.
	SS 1
LE V: Other provisions, if any.	
<del></del>	<del></del>
	<u></u>
DEALIBER OWN THRE	•
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	_
NEQUIRED SIGNATURE:	
7× 2	
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the
Signature of a member or This document is executed in accordance any false information submitted in a document in	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the
Signature of a member or This document is executed in accordance any false information submitted in a doct 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 thument to the Department of State constitutes a third degree felo
Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)