# 12200345963

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

TO:	New Fi	ling Section			
	Divisio	n of Corporation	S		
SUBJ	ECT: _	Ten-	Sankins (Name of Resulting Flor	Entention (e.s.	1-60

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Benjamin Jentins (Contact Person)
(Contact Person)
Team Junkins Enterpoises
(Firm/Company)
224 Chroce Lane
(Address)
OCenge Post 1/32\$65 (City, State and Zip Code)
(City, State and Zip Code)
1-mail Address. (to be used for future annual report notifications)
1-mail Address, (to be used for future annual report notifications)

For further information concerning this matter, please call:

Benjamin Je	ations	at (678)	629-4878
Jame of Contact Pers			(Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☐ \$150,00 Filing Fees (\$25 for Conversion & and Certificate of & and Certified Copy & Certified Copy, and Certificate of Status of Organization)

#### Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
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:
Team Jankins Enterprises (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of Florida, (Emer state, or if a non-U.S. entity, the name of the country)
on 29 1/1 2020/ (date of organization formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Tecies Jankins Enterprises (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.

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Signed this 8 day of Angust	20
Signature of Authorized Representative of Lim	
Signature of Authorized Representative:	Title. OLDER
Signaturated on bohalf of Other Rusiness Entity	(See below for required signature(s))
Signature:  Printed Name: A sylvanian or Viner business trains.	Title: Owner
Signature: Printed Name:	
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 If Directors or Officers have not been selected, an Ir	
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabil Signatures of <u>ALL</u> General Partners.	ity Limited Partnership:
All others: Signature of an authorized person.	
Fees:	

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Team Jenkin's (niesprise LL?
(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 Liability Company is:

224 Glimore Line 227 Gillinge Lesse Grange Park (1) 3255 Grange Port (1) 3206	Principal Office Address:	Mailing Address:
<u> </u>	224 Gilmore Line Grange Park (1 )2555	227 61/ NOTE LESE OCCAGE POOTE (132065

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Ranjamin JerkinName

224 Gilmere Lone

Florida street address (P.O. Box NOT acceptable)

George Perk Fl 72065

City Zip

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)

Title:	Name and Address:
"AMBR" Authorized Member "MGR" - Manager <u>月仏人</u>	Benjamn Junkins 224 Coloners Lane Grunge Pack D. Ricks
········	
<del></del>	

Signature of a prember or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$ 817-155, F.S.

Benjamin Jankins
Typed or printed name of signee

REQUIRED SIGNATURE:

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)

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