122000357134

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
492000099354

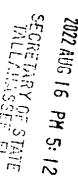
Office Use Only



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2022 12 12

July 29, 2022

JEFF DAVIS 874 SW GRAND RESERVES BLVD PORT ST LUCIE, FL 34986

SUBJECT: JPSOURCE OF SOUTH CAROLINA, LLC

Ref. Number: W22000099356

We have received your document for JPSOURCE OF SOUTH CAROLINA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is a limited partnership or business entity, an authorized person must sign the certificate of conversion.

The filing fee for the conversion is \$150.00. You submitted a check for \$25.00. Please submit a check for the other \$125.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace Regulatory Specialist II

Letter Number: 522A00017034

COVER LETTER

TO:	New Filing So Division of Co					
SHRI	IECT: JPSOUR	CE OF FLORIDA. LLC				
SOD	LC1		ulting	Florida Limite	d Com	pany)
						d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this	matter to:		
JEFF	DAVIS					
		(Contact Person)		·-··		
JPSO	URCE OF SOUT	H CAROLINA, LLC				
		(Firm/Company)				
874 S	W GRAND RESE	ERVES BLVD.				
		(Address)				
PORT	SAINT LUCIE, F	ELORIDA 34986				
		City, State and Zip Code)				
JEFF	'' DAVIS@JPSOUF	•				
		e used for future annual re	port n	otifications)		
For n	urther information	on concerning this ma	iter, j	olease call:		
JEFF	DAVIS		_at (704)	
	(Name of Conta	ct Person)		(Area Code)	(Day	time Telephone Number)
		or the following amou a bank located in the			rocess	sed by this office must be payable in US
(\$25 f & \$12	50.00 Filing Fees or Conversion 5 for Articles (anization)	\$155.00 Filing Fees and Certificate of Status		3180.00 Filing Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632	ection forporations			New I Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

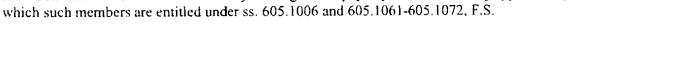
Into

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 of Conversion is: JPSOURCE OF SOUTH CAROLINA, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
JANUARY 1, 2007 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: JPSOURCE OF FLORIDA, 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.
5. The plan of conversion has been approved in accordance with an applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to



Signed this 12	TH day of JULY	20	
Signature of A	Authorized Representa	tive of Limited Liability Company:	<u> </u>
Signature of A	uthorized Representativ	e: Hear Lowi	NED
		ness Entity: See below for required s	
Signature:	Iday his	aux	
Printed Name:	1/1 (JEFFREY L	TAULS Title: GENERAL PA	RTNER
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:_		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:_		Title:	
Signature:			
Printed Name:	~	Title:	
If Florida Cor			
If Directors or (hairman, Vice Chairman, Officers have not been se	Director, or Officer. elected, an Incorporator must sign.	
If Florida Gen Signature of on	<u>teral Partnership or Lin</u> ne General Partner.	mited Liability Partnership:	
Signatures of A	<u>iited Partnership or Lin</u> ALL General Partners.	nited Liability Limited Partnership:	
All athors			
All others: Signature of an	authorized person.		
<u>Fees:</u>	ŕ		
	s of Conversion:	\$25.00	
	or Florida Articles of Orged Copy:	~	
	cate of Status:	\$30.00 (Optional) \$5.00 (Optional)	



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must o	da, LLC. contain the words "Limited Liab	bility Company, "I	L.C.," or "LLC.")
RTICLE II - Address: the mailing address and stre	et address of the principal offic	e of the Limited L	iability Company is:
<u>Prir</u>	cipal Office Address:		Mailing Address:
874 SW Grand R	eserves Blvd	874 S	W Grand Reserves Blvd
		Port S	aint Lucie
Port Saint Lucie		10.00	
Florida 34986 RTICLE III - Registered The Limited Liability Compother business entity with	an active Florida registration.)	Florida Registered Agent gistered Agent. Yo	a 34986
Florida 34986 RTICLE III - Registered The Limited Liability Compother business entity with	any cannot serve as its own Re	Florida Registered Agent gistered Agent. Yo	a 34986 's Signature:
Florida 34986 RTICLE III - Registered The Limited Liability Composition of the business entity with	any cannot serve as its own Re an active Florida registration.) reet address of the registered ag	Florida Registered Agent gistered Agent. Yo	a 34986 's Signature:
Florida 34986 RTICLE III - Registered The Limited Liability Composition of the business entity with	any cannot serve as its own Re an active Florida registration.) reet address of the registered ag	Florida Registered Agent gistered Agent. You gent are:	a 34986 's Signature:
Florida 34986 RTICLE III - Registered The Limited Liability Composition of the business entity with	any cannot serve as its own Re an active Florida registration.) reet address of the registered ag <u>Jeff Davis</u> N	Florida Registered Agent gistered Agent. You gent are: Jame s Blvd.	a 34986 's Signature: ou must designate an individual or
Florida 34986 RTICLE III - Registered The Limited Liability Composition of the business entity with	any cannot serve as its own Re an active Florida registration.) reet address of the registered ag Jeff Davis N 874 SW Grand Reserves	Florida Registered Agent gistered Agent. You gent are: Jame s Blvd.	a 34986 's Signature: ou must designate an individual or

(CONTINUED)

1

ARTICLE IV-

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

"AMDD" = Authorized Member	
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Jeff Davis
	874 SW Grand Reserves Blvd, Port Saint Lucie
	Florida 34986
<u>MGR</u>	Pat Davis 874 SW Grand Reserves Blvd, Port Saint Lucie
	Florida 34986
	<u>Fjorida 34760</u>
	
(Use attachment if necessary) CLE V: Effective date, if other than to effective date is listed, the date must	the date of filing: (OPTIONAL)
CLE V: Effective date, if other than teffective date is listed, the date muste of filing.)	it be specific and cannot be more than five business days prior to or 90 days after es not meet the applicable statutory filing requirements, this date will not be listed
CLE V: Effective date, if other than teffective date is listed, the date muste of filing.) If the date inserted in this block do	it be specific and cannot be more than five business days prior to or 90 days after es not meet the applicable statutory filing requirements, this date will not be listed
CLE V: Effective date, if other than the effective date is listed, the date must the of filing.) If the date inserted in this block document's effective date on the Department of the Departme	it be specific and cannot be more than five business days prior to or 90 days after es not meet the applicable statutory filing requirements, this date will not be listed
CLE V: Effective date, if other than the effective date is listed, the date must the of filing.) If the date inserted in this block document's effective date on the Department of the Departme	es not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
CLE V: Effective date, if other than teffective date is listed, the date muste of filing.) If the date inserted in this block document's effective date on the Depa CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document is I am aware that a	it be specific and cannot be more than five business days prior to or 90 days after es not meet the applicable statutory filing requirements, this date will not be listed

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)

SECRETARY OF STATE
TALLAHASSEE, FI

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

JPSOURCE OF SOUTH CAROLINA, LLC, a limited liability company duly organized under the laws of the State of South Carolina on July 7th, 2015, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

1022 AUG 16 PM 5: 1 ECRETARY OF STAT TALLAHASSEE, FL

Given under my Hand and the Great Seal of the State of South Carolina this 14th day of April, 2022.

Mark Hammond, Secretary of State