# L22000359602

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

Office Use Only



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5. CHATHAM AUG 17 2022





CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

Phone: 850-558-1500

ACCOUNT NO. : 12000000195	
REFERENCE : 886227 8284021	
AUTHORIZATION:	
COST LIMIT : \$ 150.00	
ORDER DATE : August 16, 2022	
ORDER TIME: 1:39 PM	
ORDER NO. : 886227-020	
CUSTOMER NO: 8284021	
FOREIGN FILINGS	
NAME: JMJ RACING STABLES, LLC	
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY	
XXXX CONVERSION AND INCORPORATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	

EXAMINER:

# **COVER LETTER**

TO: New Filing Se Division of Co					
SUBJECT: JMJ Racin	ng Stables, LLC				
	(Name of Re	sulting Florida Lim	ited Cor	mpany)	
The enclosed Articles Business Entity" into	of Conversion, Artic a "Florida Limited L	cles of Organizat iability Compan	ion, an y" in a	nd fees are submitted to convert an coordance with s. 605.1045, F.S.	<b>^</b> 5
Please return all corres	spondence concerning	ig this matter to:			17.03
Michael Narlinger					17
	(Contact Person)	-	<del></del>		:
c/o Silverman Schermer	, PLLC				<u> </u>
	(Firm/Company)		-		ر ۱ د
401 E. Las Olas Blvd., S	uite 1400				,
	(Address)		_		
	ty, State and Zip Code)		-		
Fort Lauderdale, FL 333			_		
E-mail Address: (to be	used for future annual re	port notifications)			
For further information	concerning this ma	tter, please call:			
mtsujimoto@brooklineig.					
(Name of Contact		_at (	_)	time Telephone Number)	
	·		-	,	
Enclosed is a check for	the following amou	int: (All checks p	rocess	ed by this office must be payable in	ı US
dollars and drawn on a	oank located in the	United States)			
(\$25 for Conversion a	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Addre	\$5:		Street	Address:	
New Filing Sec	tion			Filing Section	
Division of Cor	porations		Divisi	on of Corporations	
P.O. Box 6327 Tallahassee, FL	22214			entre of Tallahassee	
rananassee, FL	32314			N. Monroe Street, Suite 810 assee, FL 32303	
			i anan	assec, FL JZJVJ	

## **Articles of Conversion**

For

#### "Other Business Entity"

Into

### Florida Limited Liability Company

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.

JMJ Racing Stables, LLC
(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
(Enter state, or if a non-U.S. entity, the name of the country)
01/09/2001 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:
JMJ Racing Stables, 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 31 day of August	20_22
Signature of Authorized Representative of Limit	
Signature of Authorized Representative:  Printed Name: Dennis Narlinger	Title Manager
Signature(s) on behalf of Other Business Entity:	•
Signature: Printed Name: Dennis Narlinger	Title: Manager
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

JMJ Racing Stables			
(Mı	ist contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ad	ldress:		
		e principal office of the Limited Liability Compa	any is:
Principal Office A	Address:	Mailing Address:	
c/o Silverman Scher	mer, PLLC	c/o Silverman Schermer, PLLC	
404 E. Las Olsa CI	- Cuito 1400	101 5 1 01 51 1 0 11 1100	<b>           </b>
401 E. Las Olas Blv	a., Suke 1400	401 E. Las Olas Blvd., Suite 1400	- 156 E
Fort Lauderdale, FL  ARTICLE III - R	33301 egistered Agent, Registo	Fort Lauderdale, FL 33301 ered Office, & Registered Agent's Signature:	2 /US 17
Fort Lauderdale, FL  ARTICLE III - R (The Limited Liability Companies and the second s	33301 egistered Agent, Registo	Fort Lauderdale, FL 33301  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another	5777
Fort Lauderdale, FL  ARTICLE III - R (The Limited Liability Companies and the second s	egistered Agent, Registrompany cannot serve as its own Factive Florida registration.) Florida street address of the Steven J. Schermer	Fort Lauderdale, FL 33301  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another	LUS 17 PH 4:
Fort Lauderdale, FL  ARTICLE III - R (The Limited Liability Companies and the second s	egistered Agent, Registrompany cannot serve as its own Factive Florida registration.) Florida street address of the Steven J. Schermer	Fort Lauderdale, FL 33301  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	LUS 17 PH 4:
Fort Lauderdale, FL  ARTICLE III - R (The Limited Liability Companies and the second s	egistered Agent, Registered Agent, Registered Agent, Registered agency cannot serve as its own Factive Florida registration.)  Florida street address of the Steven J. Schermer  No. 401 E. Las Olas Blvd., Su	Fort Lauderdale, FL 33301  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	LUS 17 PH 4:
Fort Lauderdale, FL  ARTICLE III - R (The Limited Liability Companies and the second s	egistered Agent, Registered Agent, Registered Agent, Registered agency cannot serve as its own Factive Florida registration.)  Florida street address of the Steven J. Schermer  No. 401 E. Las Olas Blvd., Su	Fort Lauderdale, FL 33301  ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	LUS 17 PH 4:

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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

A KANGO TO BUILD OF TOOL BARONS DAY	
AMBR" = Authorized Member MGR" = Manager	
MGR	Dennis Narlinger
	401 E. Las Olas Blvd., Suite 1400
	Fort Lauderdale, FL 33301
Use attachment if necessary)	
E V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	) es
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	) e J
Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware tha ment to the Department of State constitutes a third degree felon
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Dennis Narlinger	with section 605.0203 (1) (b), Florida Statutes, I am aware tha ment to the Department of State constitutes a third degree felon
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Dennis Narlinger	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware tha ment to the Department of State constitutes a third degree felon ped or printed name of signee  Filing Fees