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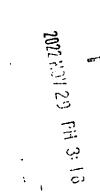
(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Jo Rae Fig	1 LLC
(Name of Resulting	Plorida Limited Company)
	Organization, and fees are submitted to convert an "Other y Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this	matter to:
Victoria Tona (Contact Person)	
(Firm/Company)	
9409 Woodhurst Dr.	
MCKINEM TX 7507 (City, State and Zip Code)	12
Victoria rae tona @am E-mail Address: (to be used for future annual report no	nait.com
For further information concerning this matter, p	olease call:
Victoria Tona at (Name of Contact Person)	469 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (a dollars and drawn on a bank located in the Unite	All checks processed by this office must be payable in US ed States)
	180,00 Filing Fees Certified Copy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section	Street Address: New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The 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 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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>limited partnership</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Texas (linter state, or if a non-U.S. entity, the name of the country)
on 07 [28 [202] (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Jo Rae Fig LLC (Enter Name of Florida Limited Liability Company)
(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 day of Nivember_	20_17
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: 1140 Printed Name: Nictoria Tona	
Signature(s) on behalf of Other Business Entity: 1	
Signature: Vanessa Erriquy Printed Name: Vanessa Enrique?	Title: managar
Signature:Printed Name:	_ Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc If Florida General Partnership or Limited Liabilit Signature of one General Partner.	corporator must sign.
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> 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)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:
Jo Rae Fig LLC
(Must contain the words "Limited Dability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
17462 Front Beach 12d. #22D 9409 Woodhurst Dr. Panama. City Beach, FL 32413 Mckinney, TX 75072
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:
Lok Tung
17462 Front Beach Rd. #22D Florida street address (P.O. Box NOT acceptable)
Panama City Beach FL 82413 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)

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Vanessa Enriquez
MGR	Victoria Tong 9409 Woodhurst Dr. Mckinney, TX 75072
	<u></u>
(Use attachment if necessary)	•
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	J' Jimos
Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605,0203 (4) (b). Florida Statutes, I am awar nent to the Department of State constitutes a third degree
as provided for in s.817.155, F.S.	-arial Tonor
as provided for in s.817.155, F.S.	TOVIO TONG ped or printed name of signee

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)