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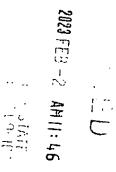
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	





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COVER LETTER

TO: New Filing Sec Division of Cor			
Division of Cor	porations / 15'3	110	
SUBJECT:	115903	<u>, LLL</u>	
	(Name of Resi	nting Florida Limited Con	apany)
			d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corresp	pondence concerning	this matter to:	
Mitch	JACOB	son	
Ba .	(Contact Person)	3,4C	•
310 '	(Firm/Company)	Th ST	15
New	(Address)	, M 1	0019
Mitch	y, State and Zip Code) W CA used for future annual rep	orn notifications)	com
For further information	concerning this mat	ter, please call:	
M+Ch (Name of Contact	JACOUSON Person)	at ((Area Code) (Day	123 - 8307 time Telephone Number)
•	the following amoun	nt: (All checks process	sed by this office must be payable in US
(\$25 for Conversion a	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address New Filing Sect			Address: Filing Section
Division of Cor			on of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

INHS11 (7/17)

P.Q. Box 6327

Tallahassee, FL 32314

91:11WV 2-5

<u>.</u> .

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: JB403, Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
(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)
on10/27/2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: JB403, 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



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Comp	Dany is:			
JB403, LLC				
	ed Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
The mailing address and street address of	of the principal office of the Limited L	iability Com	pany is	:
Principal Office Address:	Mailing Address:			
275 Palm Ave, Apt. A-403	310 West 55th Street, Apt. 1-J			
Jupiter, FL 33477	New York, NY 10019			
				
The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address		ridual or another		
Roger Jacobson				
rioger vacobson	Name			
	_			
10452 Oakview Point Florida street addre	ss (P.O. Box <u>NOT</u> acceptable)			
Gotha	FL ³⁴⁷³⁴			
City	Zip			
liability company at the place design registered agent and agree to act in this statutes relating to the proper and con	mplete performance of my duties, and l in as registered agent as provided for in	t the appointn oith the provis am familiar	nent as ions of with an	all
Registered Agen	t's Signature (REQUIRED)			
(CC	ONTINUED)	·	2023 FEB -2	
		Alleg Lette Myte L	AM !!: 46	

ARTICLE IV-	
The name and address of each persor	authorized to manage and control the Limited Liability
Company:	
Title:	Name and Address:

"AMBR" = Authorized Member "MGR" = Manager MGR & AMBR Mitch Jacobson 310 West 55th St, Apt. 1-J New York, NY 10019 Jennifer Jacobson MGR & AMBR 310 West 55th St, Apt. 1-J New York, NY 10019 (Use attachment if necessary) ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member 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 s.817.155, F.S.

Mitch Jacobson

Typed or printed name of signee

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)

AH 11: 46

Signed this day of	20			
Signature of Authorized Representative of Limited Liability Company:				
Signature of Authorized Representative:	Mitch Jacobson			
Signature of Authorized Representative: Printed Name: Mitch Jacobson	Title: President			
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]				
Signature: Mitch Jacobson	Title: President			
Printed Name: Mitch Jacobson	Title: President			
Signature:				
Printed Name:	Title:			
Printed Name:	Title:			
Timed Name.				
Signature:				
Printed Name:	Title:			
Signature:	Title:			
Printed Name:	Title:			
Signature				
Printed Name:	Title:			
If Florida Corporation:				
Signature of Chairman, Vice Chairman, Dir				
If Directors or Officers have not been select	ed, an Incorporator must sign.			
If Florida General Partnership or Limite	d Liability Partnership:			
Signature of one General Partner.				
If Florida Limited Partnership or Limite Signatures of ALL General Partners.	d Liability Limited Partnership:			
All others:				
Signature of an authorized person.				
Fees:				
Articles of Conversion:	\$25.00			
Fees for Florida Articles of Organi				
Certified Copy:	\$30.00 (Optional)			
Certificate of Status:	\$5.00 (Optional)			

conversion document

Final Audit Report

2023-01-28

Created:

2023-01-27

Ву:

Mitch Jacobson (mitch@cat5tv.com)

Status:

Signed

Transaction ID:

CBJCHBCAABAAvShtQAgEZuD6F5st1WAWwha9MRc8Seuc

"conversion document" History

- Document created by Mitch Jacobson (mitch@cat5tv.com) 2023-01-27 3:52:40 PM GMT- IP address: 98.7.222.20
- Document emailed to rsjacobson@cfl.rr.com for signature 2023-01-27 4:03:30 PM GMT
- Email viewed by rsjacobson@cfl.rr.com 2023-01-27 4:03:33 PM GMT- IP address: 66.249.87.162
- Signer rsjacobson@cfl.rr.com entered name at signing as RSJ 2023-01-28 6:04:05 PM GMT- IP address: 142.197.171.119
- Opcument e-signed by RSJ (rsjacobson@cfl.rr.com)

 Signature Date: 2023-01-28 6:04:07 PM GMT Time Source: server- IP address: 142.197.171.119
- Agreement completed. 2023-01-28 - 6:04:07 PM GMT

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