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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	y/State/Zip/Phone #)	·
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)	
(De	ocument Number)	
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·: Copies	Certificates o	of Status
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Office Use Only



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INC. 236 East 6

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

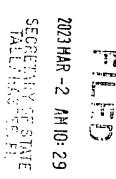
	PIC	K UP: 3/2 Glinda
	CERTIFIED COPY	
XX	РНОТОСОРУ	
	cus	
xx	FILING	CONVERSION
1.	UPTOWN DEVELOPER	
2.		
	(CORPORATE NAME AND DOCU	JMENT #)
3.	(CORPORATE NAME AND DOCU	JMENT #)
4.	(CORPORATE NAME AND DOCU	JMENT #)
5.	(CORPORATE NAME AND DOCU	JMENT #)
6.	(CORPORATE NAME AND DOCU	JMENT #)
SPECIA INSTR		

COVER LETTER

TO: New Filing Section		
Division of Corporations		
SUBJECT: Uptown Juggernaut, LLC		
(Name of Res	sulting Florida Limited C	(ompany)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	-	and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all correspondence concernin	g this matter to:	
Blade Benjamin		202 SE ₁ T ₁
(Contact Person)		
Uptown Juggernaut, LLC		SECRETURY TALLAHAS
(Firn/Company)		20 N
12199 Nw 7 Ave		69 a 17
(Address)		MID: 2
Miami FL 33168		7 29 29
(City, State and Zip Code)	-	
Blade.benjamin@gmail.com		
E-mail Address: (to be used for future annual re	port notifications)	
For further information concerning this ma	atter, please call:	
Blade Benjamin	at () 40	04.840.0420
(Name of Contact Person)	(Area Code) (E	Daytime Telephone Number)
Enclosed is a check for the following amoudollars and drawn on a bank located in the		essed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	S S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Nev Div The	eet Address: w Filing Section rision of Corporations c Centre of Tallahassee 5 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.

The name of the "Other Business Entity" immediately prior to t Uptown Developers Inc	he filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, ge	neral partnership, common law or business trust, etc.
This organized: forthed or memporated under the laws or	FL or if a non-U.S. entity, the name of the country)
on 02/10/2011 (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth	in the attached Articles of Organization:
Uptown Juggernaut, LLC	in the attached Articles of Organization.
(Enter Name of Florida Limited Liability Company	·)
4. If not effective on the date of filing, enter the effective date:	03/02/2023
(The effective date: Cannot be prior to date of receipt or filed d the date this document is filed by the Florida Department of St Note: If the date inserted in this block does not meet the applicable statutory fil document's effective date on the Department of State's records.	late nor more than 90 calendar days after ate.)
5. The plan of conversion has been approved in accordance with al	l 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 2 day of _March	20_23			
Signature of Authorized Representative of Limit	ted Liability Company:			
Signature of Authorized Representative: Printed Name: Blade Benjamin	Title: MGR	_		
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]			
Signature: Blade Benjamin	Title: PV, CFO	-		
Signature:Printed Name:	_ Title:	_ 		
Signature:Printed Name:	Title:	 \\	202	
Signature: Printed Name:		- ALLA ALLA	2023 HAR	- A A A A A A A A A A A A A A A A A A A
Printed Name:	_ Title:	- 50 7.61 7.61	-2	I
Signature:Printed Name:	_ Title:	- 27 - 75 - 75	AM 10: 29	
Signature:Printed Name:			29	
Printed Name:	1 itle:	-		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc.	corporator must sign.			
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Uptown Juggernaut, LLC (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 Co	ompany is:
Principal Office Address: Mailing Address:	
12199 Nw 7 Ave 12199 Nw 7 Ave	
Miami FL 33168 Miami FL 33168	
The name and the Florida street address of the registered agent are: Blade Benjamin Name Name Name	EIL ED
12199 Nw 7 Ave	ë 🗘
Florida street address (P.O. Box NOT acceptable)	ŏ
Miami FL 33168	
City Zip	
Having been named as registered agent and to accept service of process for the above so liability company at the place designated in this certificate. I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the prostatutes relating to the proper and complete performance of my duties, and I am familia accept the obligations of my position as registered agent as provided for in Chapter 6	intment as ovisions of all ar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	Blade Benjamin	
	12199 Nw 7 Ave	
	Miami FL 33168	
		<u> </u>
		23 M. ECRE
		HAR -2
	4	33.3
		25 Am 10
		0:29
(Use attachment if necessary)		
•		
CLE V: Other provisions, if any. 92-2658474		
92-2658474		
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.

Blade Benjamin

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)