# 23000133444

(Requestor's Name)
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PICK-UP WAIT MAIL
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SECRETARY OF STATE
TALLAPYSSEE, FI

#### **COVER LETTER**

TO:	New Filing S Division of C					
SHRJ		JACK ENTERPRISES,	LLC			
., .,		(Name of Res	sultin	g Florida Lim	ite	1 Company)
The e Busin	nclosed Article less Entity" into	s of Conversion, Artic a "Florida Limited Li	les c abil	of Organizat ity Compan	io: y"	n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g thi	s matter to:		
PAUL	. M PHILLIPS					
		(Contact Person)			_	
WEST	TCHASE LAW, F	P.A.				
		(Firm/Company)			_	
12029	WHITMARSH L	ANE				
_		(Address)			_	
TAME	PA, FL 33626					
		City, State and Zip Code)		<del>.</del>	-	
PAUL	@WESTCHASE	•				
E-r	nail Address: (to b	e used for future annual re	port r	notifications)	-	
For fu	rther informati	on concerning this ma	tter,	please call:		
PAUL	M PHILLIPS		at	, 813		435-3568
	(Name of Conta	ict Person)	at	\	_)_ )	(Daytime Telephone Number)
Enclo dollar	sed is a check f is and drawn on	or the following amou a bank located in the	nt: ( Unit	All checks ped States)	pro	ocessed by this office must be payable in US
(\$25 fo & \$125	60.00 Filing Fees or Conversion 5 for Articles unization)	■\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Cop		ees
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7			N D T 2	treet Address: ew Filing Section rivision of Corporations he Centre of Tallahassee 415 N. Monroe Street, Suite 810 APR allahassee, FL 32303

INHS11 (7/17)

## 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.

JOHN & JACK ENTERPRISES, 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)
02/21/2001 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:
JOHN & JACK ENTERPRISES, 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.
(O N

Signed this 28 day of February	_ <sub>20</sub> 23 .
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:Printed Name: PAUL JALLO	Title MANAGER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Printed Name: PAUL JALYO	_Title: PRESIDENT
Signature:	
Printed Name: PAUL JALLO	
Signature: Printed Name: PAUL JALLO	Title: DIRECTOR
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
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)

ARTICLES OF ORGANIZATION FOR ARTICLE 1 - Name: The name of the Limited Liability Comp		II Y COMPANY	
The name of the Emilieu Blacking Comp	, and the second se		
JOHN & JACK ENTERPRISES, LLC			
(Must contain the words "Limite	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 Company is:	
Principal Office Address:	Mailing Address:		
14314 SPRING HILL DR.	16055 STATE ROAD 52		
SPRING HILL, FL 34609	SUITE 201	·	
	LAND O LAKES, FL 34638		
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address		VIGGAI OF ABOTHET	
WESTCHASELAW	P.A., A PRIVATE LAW FIRM		
WEST STIAGE EAW,	Name		
12027 WHITMARSH			
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)		
TAMPA	FL 33626		
City	Zip		
liability company at the place design registered agent and agree to act in the statutes relating to the proper and confidence accept the obligations of my position.  Registered Agent	nt and to accept service of process for another in this certificate. I hereby accept is capacity. I further agree to comply somplete performance of my duties, and on as registered agent as provided for the int's Signature (REQUIRED)  ONTINUED)	ot the appointment as with the provisions of a with the provisions of a lam familiar with and in Chapter 605, F.S  2023 HAR 22 PH TALL ANAS SE	all d
		2: 23	2:2

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PAUL JALLO

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	PAUL JALLO 16055 STATE ROAD 52, SUITE 201 LAND O LAKES, FL 34638		
<del></del>			
(Use attachment if necessary)			
CLE V: Other provisions, if any.			
, ,			
	- 1		
	<del></del>		
RECHIRED SIGNATURE:			
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE:			
Signature of a member or	an authorized representative of a member		
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware the ument to the Department of State constitutes a third degree felor		

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)

