13000334854

(Requestor's Name)
(Address)
(Address)
(/iduless)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
Cartified Copies Cartificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600411446396

Call and

2023 JUL 12 PM 2: 25

RECEIVED 2003 JUL 12 PH 3: 18

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 866999 7998853
AUTHORIZATION: Spelle man
COST LIMIT : \$ 150.00
ORDER DATE : July 12, 2023
ORDER TIME : 2:10 PM
ORDER NO. : 866999-005
CUSTOMER NO: 7998853
FOREIGN FILINGS
NAME: JHM INVESTMENT ENTERPRISES LLC
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker EXT#
EVAMINED.

COVER LETTER

TO:	New Filing Sec Division of Co					
ou in	JHM Inves	stment Enterprises LLC				
SUB	JEC1:	(Name of Resu	lting Florida Lim	ited Comp	pany)	
Busi	ness Entity" into	a "Florida Limited Lia	bility Compar	iy ili aci	fees are submitted to convert an "Ot cordance with s. 605.1045, F.S.	ner
Pleas	se return all corre	spondence concerning	this matter to	:		
		David A. Kallick				
-		(Contact Person)		_		
	Ber	njamin, Gussin & Associ	ates			
		(Firm/Company)				
	80)1 Skokie Blvd., Suite 10	0			
		(Address)				
	N	forthbrook, Illinois 60062				
	((City, State and Zip Code)		_		
	dl	kallick@bgalawfirm.com				
	E-mail Address: (to b	e used for future annual re	port notifications)		
For	further information	on concerning this ma	tter, please cal	i:		
	David A.				rtime Telephone Number)	
	(Name of Conta	act Person)	(Area Co	de) (Day	rtime Telephone Number)	
Enc dol	closed is a check flars and drawn on	for the following amou a a bank located in the	int: (All check United States)	s process	sed by this office must be payable in	US
(\$2: & \$	5150.00 Filing Fees 5 for Conversion 125 for Articles Organization)	\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Fill and Certified		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of O P.O. Box 632 Tallahassee,	Section Corporations 27		New Divis The 0 2415	Filing Section sion of Corporations Centre of Tallahassec N. Monroe Street, Suite 810	2023

INHS11 (7/17)

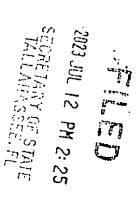
Articles of Conversion For "Other Business Entity" Into

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: JHM Investment Enterprises LLC
(Enter Name of Other Business Entity)
limited liability company 2. The "Other Rusiness Entity" is a
2. The "Other Business Entity" is a [imited liability company] (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)
July 26, 2021
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: JHM Investment 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.



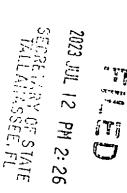
Signed this day of	20_27	
Signature of Authorized Representative of Limite	ed Liability Company:	
Signature of Authorized Representative: Printed Name: David A. Kallick	O a Calle	
Signature(s) on behalf of Other Business Entity: [S	ee below for required signature(s)]	
Signature: Towel H. Marks Printed Name: TERM 2 H. MARCS	Title: MEMBER	
Signature:Printed Name:	Title:	
Signature:Printed Name:		
Signature:Printed Name:		
Signature:Printed Name:	Title:	
Signature:Printed Name:	_ Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Clif Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
<u>Fees:</u>		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	2023 JUL 12 PM SECRETARY OF S
		2: 25 STATE STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Lin	nited Liability Company is:		
JHL	Investment Enterprises LLC		
(Musi	contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Add The mailing address	dress: and street address of the pl	rincipal office of the Limi	ted Liability Company is:
Principal Office Ac	ldress:	Mailing Address:	
4600 Gulf of Mexico		4600 Gulf of Mexico Driv	e
Unit 202		Unit 202	
Long Boat Key, Florid	ta 34228	Long Boat Key, Florida 3	4228
The name and the F	lorida street address of the	registered agent are:	
	Nam		
	4600 Gulf of Mexico D	Prive, Unit 202	
	Florida street address (P.C). Box <u>NOT</u> acceptable)	
	Long Boat Key	FL ³⁴²²⁸	
	City	Zip	
liability compo registered agent (any at the place designated i and agree to act in this capa	n this certificate, I nereby city. I further agree to con performance of my duties,	npty with the provisions of all , and I am familiar with and

(CONTINUED)

Teure H. Marke Registered Agent's Signature (REQUIRED)



	Name and Address:
<u>[itle:</u> AMBR" = Authorized Member	Name and Address
MGR" = Manager	
MGR	Jerrold H. Marks
WIGHT.	4600 Gulf of Mexico Drive, Unit 202
	Long Boat Key, Florida 34228
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
•	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	Solid anthoused Representat
REQUIRED SIGNATURE:	Solid anthonzed Representat
REQUIRED SIGNATURE:	or an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member of this document is executed in accordar any false information submitted in a doc as provided for in s.817.155, F.S.	

ARTICLE IV-