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(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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09/11/23--01029--016 **185.00



COVER LETTER

Division	of Corporations			
CUBICT.	Tanahara	11-6		
SUBJECT:	Janahoca, (Name of Res	aulting Florida Limited Co	mpany)	
The enclosed Ar Business Entity"	ticles of Conversion, Artic Tinto a "Florida Limited Li	les of Organization, a ability Company" in a	nd fees are submitted to con accordance with s. 605,1045	vert an "Other 5, F.S.
Please return all	correspondence concerning	g this matter to:		
	(Contact Person) J ana Noca L (Firm/Company) 140 Waterway (Address) Pauce ta FL U (City, State and Zip Code)	Rd 33469		
	Sb poncyagma : (to be used for future simual re	ail.com		
E-mail Address	; (to be used for future annual re	port notifications)		
For further infor	mation concerning this ma	tter, please call;		
Susar	1 Poncy Contact Person	at (561) 3	361-0091	
(Name of	Contact Person	(Area Code) (Da	sytime Telephone Number)	
Enclosed is a ch dollars and draw	eck for the following amount on a bank located in the	int: (All checks proce: United States)	ssed by this office must be J	nayable in US
S150.00 Filing (\$25 for Conversio & \$125 for Articles of Organization)	n and Certificate of	□\$180,00 Filing Fees and Certified Copy	2185,00 Filing Fees. Certified Copy, and Certificate of Status	
New Fil Division P.O. Bo	Address: ing Section of Corporations x 6327 see, FL 32314	New Divi The	et Address: Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 8	2023 SEP 11

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.

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)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (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)
on 9/29/2014 (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Janahoca, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 10/1/23. (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 2nd day of Sep	stember 20_23
Signature of Authorized Represen	tative of Limited Liability Company:
Signature of Authorized Representat Printed Name: <u>MSAn Ponca</u>	ive:
Signature(s) on behalf of Other Bus	iness Entity: [See below for required signature(s)]
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
	Title:
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairma If Directors or Officers have not been	
If Florida General Partnership or 1 Signature of one General Partner.	imited Liability Partnership:
If Florida Limited Partnership or L Signatures of <u>ALL</u> , General Partners.	imited Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	г !

Articles of Conversion:

Certified Copy: Certificate of Status:

\$25.00 Fees for Florida Articles of Organization: \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	hilita Campany i	i			
The name of the Limited Lia	онцу Сотрану і	18.			
Janaha	a LLC				
(Must contain the	ca, LLC words "Limited Liab	ility Company, "	L.L.C ," or "LLC ")		_
ARTICLE II - Address:					
The mailing address and stre	et address of the	principal off	ice of the Limit	ed Liability (Company is:
Principal Office Address:		Mailing	Address:		
19140 Waterway	Rel	19	140 Wate	erway R	d
19140 Waterway Tequesta, to	33469		140 Water	F1 3346	- 9 -
ARTICLE III - Registered (The Limited Liability Company cann business entity with an active Florida	ot serve as its own Re	ed Office, & gistered Agent, Y	z Registered A ou must designate a	gent's Signa n individual or ar	ture: nother
The name and the Florida str	reet address of th	e registered a	igent are:		
/	Morgan Po.	ncy			
	Na	me			
,	19140 Wat	erwan	Rel		
Florida	street address (P	O. Box NO	<u>r</u> acceptable)		
T,	Paush	Fi	33469		
	equesta City		Zip		
Having been named as reg liability company at the registered agent and agree statutes relating to the pr accept the obligations	place designated to act in this cap oper and comple	Lin this certif pacity. I furth te performan	icate. Thereby a er agree to com ce of my duties.	iccept the app iply with the p and I am fam	oointment as provisions of al viliar with and ar 695 F.S.,
`					23 Si ====
		(1) [OLUBED)	- ;	
Regi	istered (gent's S	agnature (RE	QUIKED)	į.	6
	(CONT	INUED)		74 (1) 15 (3) 16 (4) 17 (4)	Aii 10: 25

ARTICLE IV-

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

'AMBR" = Authorized Member	
'MGR" = Manager	ρ . ρ
MGIL	Usan Poncy
	Susau Poncy
	Tequery 12 35469
14	
MG-12	Morgan Poncy
	19140 Waterway 12d
	- Movgan Ponce, - 19140 waterway 12cl - Tequeria, FL 33469
A 10 + 2 11	
AMBIL	Nadin Poncy
	19140 Waterway Rel
	Nadia Poncy 19140 Waterway Pel Tequella, Fr 33469
A 14 13 A	- 0
FMER-	Tack Poncy 19140 Waterway Rd Tegwerta, FV 32469
	19140 waternay Rd
	Tequella, FV 33409
Use attachment if necessary)	
Use attachment if necessary)	
·	
LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
L E V: Other provisions, if any. <i>E1N</i> 47-1462426	
LE V: Other provisions, if any. E/N 47-1462426 REQUIRED SIGNATURE:	
L E V: Other provisions, if any. <i>E1N</i> 47-1462426	
LE V: Other provisions, if any. E/N 47-1462426 REQUIRED SIGNATURE:	
LE V: Other provisions, if any. EIN 47-1462426 REQUIRED SIGNATURE: Signature of a member or an	authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or an This document is executed in accordance with the state of th	authorized representative of a member h section 605.0203 (1) (b). Florida Statutes. I am aware that
REQUIRED SIGNATURE: Signature of a member or an This document is executed in accordance with any false information submitted in a document.	authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or an This document is executed in a coordance wit any false information submitted in a document as provided for in s.817.155, F.S.	authorized representative of a member h section 605.0203 (1) (b). Florida Statutes. I am aware that at to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member or an This document is executed in a coordance wit any false information submitted in a document as provided for in s.817.155, F.S.	authorized representative of a member h section 605.0203 (1) (b). Florida Statutes. I am aware that at to the Department of State constitutes a third degree felony
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