L24000 279227

(F	Requestor's Name)	
٩)	Address)	-
٩)	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Ē	Business Entity Name)	
(0	Occument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to Fi	ling Officer:	
		•
<u>.</u>		

Office Use Only



000429991690

2024 JUN 20 AM 9: 47

RECEIVED

FLORIDA CAPITAL COURIER SERVICES, INC (850) 491-9625 Brandon 2330 CLARE DR (850) 524-5437 Teresa TALLAHASSEE, FL 32309 (850) 524-6243 Rich Please use funds from account: 120210000160: \$155.00 **Authorization Signature:** TSC Jacobs South, LLC **Business Name: Document** # **Certified Copy** X Certificate of Status **NEW FILINGS** & **AMENDMENTS** Profit Corp **Amendment** Resignation / Dissociation Not for Profit _Limited Liability Change of Registered Agent Domestication Revocation of Dissolution LLLP Merger Corp _X__Articles of Conversion Amended & Restated Articles of Incorpogation Inc Other Statement of Authority APOSTILLE(s) & **OTHER FILINGS** Apostille(s) Foreign Filing _Country(s) Reinstatement Qualification **Fictitious Name Annual Report**

EXAMINER'S INITIALS:

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR TALLAHASSEE, FL 32309

EXAMINER'S INITIALS: ____

(850) 491-9625 Brandon (850) 524-5437 Teresa (850) 524-6243 Rich

Please use funds from account: 120210000160: \$155.00 Authorization Signature: Jan Gall TSC Jacobs South, LLC **Business Name:** Document # Certified Copy X Certificate of Status **NEW FILINGS** & <u>AMENDMENTS</u> Amendment Profit Corp Not for Profit Resignation / Dissociation Change of Registered Agent Limited Liability ___Domestication **Revocation of Dissolution** LLLP Merger X Articles of Conversion Corp Amended & Restated Articles of Incorporation Inc Statement of Authority Other **OTHER FILINGS** & APOSTILLE(s) Apostille(s) Foreign Filing Country(s) Reinstatement _Qualification Fictitious Name **Annual Report**

COVER LETTER

TO: New Filing S Division of C				
SUBJECT: TSC Jac	obs South, LLC			
	(Name of Res	sulting Florida Limit	ed Company)	
			on, and fees are submit in accordance with s.	ted to convert an "Other 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
Marshall Kobrin, Esq.				
	(Contact Person)			
AEGIS LAW				
	(Firm/Company)			
601 S. Lindbergh Blvd				
	(Address)			20
Frontenac, MO 63131				ZOZY JUN 20
	City, State and Zip Code)			
(sily, made and mp codey			JUN 20 AM 9
E-mail Address: (to b	e used for future annual re	port notifications)		SSS P
				AM 9: 47 SEE, FU
For further information	on concerning this ma	tter, please call:		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
Marshall Kobrin		at (⁸¹³	699-1194	11, 2
(Name of Conta	ct Person)	<u> </u>	(Daytime Telephone Nun	nber)
	or the following amou a bank located in the	•	rocessed 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 and Certified Copy	_	d
Mailing Adda New Filing Se Division of C P.O. Box 632	orporations]	Street Address: New Filing Section Division of Corporation The Centre of Tallahass	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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 Artic TSC JACOBS SOUTH, INC.	les of Conversion is:
(Enter Name of Other Business Entity)	_
2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, limited partnership, general partnership, comm	non law or business trust, etc.)
First organized, formed or incorporated under the laws of	ne name of the country)
on 01/27/2022 (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Art	
 The name of the Florida Limited Liability Company as set forth in the attached Art TSC Jacobs South, LLC 	(n) -
(Enter Name of Florida Limited Liability Company)	(Pa) '9
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 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 dadocument's effective date on the Department of State's records.	90 calendar days after
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.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
TSC Jacobs South, LLC	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11021 Countryway Blvd	11021 Countryway Blvd
Tampa, FL 33626	Tampa, FL 33626
	LUTZ, FL 33559
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re	gistered agent are:
Corporation Service Company	SS: A
Name	ASSTER D
1201 Hays St.	SSECTION STATE OF THE STATE OF
Florida street address (P.O.	
Tallahassee	FL 32301
City	Zip
Henring hage named as parietared again and to	annut aumin afan a a fa da

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Corporation Service Company

By: Laurel Bistach
Registered Agent's Signature (REQUIRED)

	<u>(</u>	า
		تا =
1	_	_
j	ij	Ì
į.		٦

ARTICLE IV-

Title:

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

Name and Address:

"MGR" = Manager MGR	Austin Moore	
	11021 Countryway Blvd	
	Tampa, FL 33626	
MGR	Duggan Jacobs	
	11021 Countryway Blvd	
	Tampa, FL 33626	
· · · · · · · · · · · · · · · · · · ·		,
		:-
		>
		26°
(Use attachment if necessary)		- 10 - - 11 - E
`		ļ.
LE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
<u>Austin Moore</u> Austin Moore Jun 20, 20,24 £6.06 £0.01		

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.

Austin Moore, President