1240W289/4/

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SPECIAL INSTRUCTIONS:

236 Fast 6th Avenue. Tallahassee, Florida 32303

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~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	P	CK UP:	BROOK 6/27	<u> </u>
	CERTIFIED COPY			
XX	РНОТОСОРУ			
	GS			
XX	FILING	CON	VERSION	7074
	MJC TENNESSEE			The state of the s
(C	ORPORATE NAME AND	DOCUMENT #)		
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(C	ORPORATE NAME AND I	OOCUMENT #)		-

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 Arti DMJC Tennessee LLC	cles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, come	mon law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, t	he name of the country)
04/16/2019 on	
on (date of organization, formation or incorporation)	2ก _{วี} น
3. The name of the Florida Limited Liability Company as set forth in the attached A	
DMJC Tennessee LLC	- 1
(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	
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 of 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	s.
6. The "Converted or Other Business Entity" has agreed to pay any members having appr	aisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 26TH day of JUNE	20 <u>24</u>
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative: /S/JO	SEPH RICCIUTI
Printed Name: JOSEPH RICCIUTI	Title: AUTHORIZED PERSON
Timed Name: 00021 Title 010 Ti	1 me. 2001 10 me.
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: /S/JOSEPH RICCIUTI	
Printed Name: JOSEPH RICCIUTI	Title: AUTHORIZED PERSON
Signature:	
Signature:Printed Name:	Title:
Signature:	m: 4
Printed Name:	litle:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	litte:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, o	r Officer
If Directors or Officers have not been selected, an l	
If Florida General Partnership or Limited Liab	ility Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabi	lity Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All othors	
All others: Signature of an authorized person.	
Signature of all authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

, ·	any is:	
DMJC Tennessee 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 Lia	ability Company is:
Principal Office Address:	Mailing Address:	
777 3rd Avenue, 26th Floor	777 3rd Avenue, 26th Floor	
New York, NY, 10017	New York, NY, 10017	
business entity with an active Florida registration.)		
The name and the Florida street address of RIVERSIDE FILINGS L	LC	> 20
	-)
RIVERSIDE FILINGS L	LC Name R. 1ST FL	5000 1000 0
155 OFFICE PLAZA DE Florida street addres	Name R. 1ST FL s (P.O. Box <u>NOT</u> acceptable)	5001 1000 0 1
155 OFFICE PLAZA DE Florida street addres TALLAHASSEE	Name R. 1ST FL s (P.O. Box NOT acceptable) FL 32301	<u> </u>
155 OFFICE PLAZA DE Florida street addres	Name R. 1ST FL s (P.O. Box <u>NOT</u> acceptable)	<u> </u>
A STATE THE PROPERTY OF THE PR	Name R. 1ST FL s (P.O. Box NOT acceptable) FL 32301 Zip and to accept service of process for the ated in this certificate, I hereby accept	e above stated limited the appointment as th the provisions of all um familiar with and
A STATE THE PROPERTY OF THE PR	Name R. 1ST FL s (P.O. Box <u>NOT</u> acceptable) FL 32301 Zip and to accept service of process for the ated in this certificate, I hereby accept capacity. I further agree to comply with aplete performance of my duties, and I described to the complexity of the acceptance of the duties of the complexity of the complexi	e above stated limited the appointment as th the provisions of all um familiar with and

(CONTINUED)

ARTICLE IV-

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

<u>Fitle:</u> 'AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	
AMBR	Joseph Ricciuti
	777 3rd Avenue, 26th Floor
	New York, NY, 10017
	
Use attachment if necessary)	~)
EW OL	: <u>-</u>
LE V: Other provisions, if any.	
	: :
REQUIRED SIGNATURE:	L. in
/s/Joseph Ricciuti	
Signature of a member on	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am award ment to the Department of State constitutes a third degree f
Joseph Ricciuti	
T	ped or printed name of signee
ı y _i	Filing Fees