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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: J.T Enter Dris	Florida Limited Company)
	f Organization, and fees are submitted to convert an "Other ty Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this	s matter to:
Juan Torres (Contact Person)	
(Firm/Company) 4471 Western Gails (Address)	CT Unit 405
Flondastatellaciolox E-mail Address: (to be used for future annual report no	d. Com otifications)
For further information concerning this matter, put the state of Contact Person at (Name of Contact Person)	Olease call: 239 703 - 6078 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (A dollars and drawn on a bank located in the United	All checks processed by this office must be payable in US ed States)
	180.00 Filing Fees Certified Copy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 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)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of Florida.
on 2012023 (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
TT. Enterprise LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 12024
(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 2 day of Jan	_20 <u>Q</u> 4			
Signature of Authorized Representative of Limi	ted Liability Company:			
Signature of Authorized Representative: Sun. Printed Name: CACA OVCES	Title: Owner			
Signature(s) on behalf of Other Business Entity:				
Signature:Printed Name: Juan Torces				
Printed Name: Juan Torres	Title: Director Towner			
Signature:				
Signature: Printed Name:	Title:			
Signature:				
Signature: Printed Name:	Title:			
Signature:				
Signature:Printed Name:	Title:			
Signature:				
Signature:Printed Name:	Title:			
Signature:				
Programs				
Historian Composition: Signature of Chemican New Chemican Day, in the fellow, topology Office Cheecemon Spensylvine the				
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:			
All others: Signature of an authorized person.		ું		
<u>Fees:</u>			2023	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	, , ,	111.7 9-4011 EZQZ	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
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 Liability Company is:
Principal Office Address: Mailing Address:
4471 Western Quils CTunit 405 4471 Western Gails CT Fort Myers, FC 33916 Fort Myers, FC 33913
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Juan torres Name
H471 Western Gails CT unit 405 Florida street address (P.O. Box NOT acceptable)
Fort Myers, FL 33916 City Zip
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
Dun Cons
Registered Agent's Signature (REQUIRED)
(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member "MGR" ≈ Manager	Name and Address:
MGR.	Juan Torres 4471 Westernagis CT. Unit Fort Myers FC 33916
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ici i Necative prospector (%)	6 CH 25
REQUIRED SIGNATURE:	 -

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.

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)