<u>L24000418784</u>

-	(Requestor's Name)
	(Address)
	(Address)
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	(City/State/Zip/Phone #)
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PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Document Number)
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COVER LETTER

	Filing S ion of C	ection Corporations					
SUBJECT:	JUS 4 I	HER INVESTMENTS IN	IC				
•	-	(Name of Re	sulting Florida I.	imited Co	ompany)	· · · · · · · · · · · · · · · · · · ·	
The enclosed Business Ent	Article	s of Conversion, Artic a "Florida Limited L	cles of Organiz	ation, a any" in	nd fees are submitte accordance with s.	ed to convert an "Other 605.1045, F.S.	
Please return	all corr	espondence concernin	g this matter t	o:			
KRISTIE JON	ES						
		(Contact Person)					
JUS 4 HER IN	IVESTM	•				202Կ	
		(Firn/Company)				200	_
2351 W ATLA	NTIC BL	VD, #669494					[]
		(Address)					8 5°
POMPANO BE	EACH, F	L 33066				M 9: 45	
	((City, State and Zip Code)					
kristiejones954						, <u>m</u> ,	
E-mail Addr	ess: (to b	e used for future annual re	port notifications)			
For further in	formatio	on concerning this ma	tter, please cal	1:			
Kristie Jones		J	_at (⁹⁵⁴		2250		
(Name	of Conta	ct Person)		de) (Da	ytime Telephone Numb	er)	
Enclosed is a dollars and dr	check for	or the following amou a bank located in the	ınt: (All check	s proces		•	
S150.00 Filir (\$25 for Converse & \$125 for Artic of Organization)	sion cles	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fili and Certified C	ng Fees Copy	S185.00 Filing Fe Certified Copy, and Certificate of Status	es.	
New F Divisi P.O. B	30x 632°	ection orporations		New Divis The (t Address: Filing Section ion of Corporations Centre of Tallahasse N. Monroe Street.	ee	

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 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.

I. The name of the "Other Business Entity" immediately prior to the filing of the Artic JUS 4 HER INVESTMENTS INC	les of Conve	ersion is	s:
(Enter Name of Other Business Entity)	 '		
2. The "Other Business Entity" is a		202Կ	
(Enter entity type. Example: corporation, limited partnership, general partnership, comm	on law or busin	nessirusi	t, etc ^{li})
First organized, formed or incorporated under the laws of	٠.	-3	
(Enter state, or if a non-U.S. entity, the	e name of the c	country)	77
8/6/2024 On		خد	-
(date of organization, formation or incorporation)	-,. <u></u>	<u>1</u> .1 :6	16.00
3. The name of the Florida Limited Liability Company as set forth in the attached Art	ialaa af O		
JUS 4 HER INVESTMENTS LLC	icles of Org	anizan	on:
(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 9 the date this document is filed by the Florida Department of State.)	90 calendar	days a	fter
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	te will not be li	sted as ti	he
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 1ST day of OCTOBER	20 <u>24</u> .		
Signature of Authorized Representative of Lim	ited Liability Company:		
Signature of Authorized Representative: Printed Name: KRISTIE JONES			
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature: Printed Name: KRISTIE JONES	Title: PRESIDENT		
Signature:Printed Name:			
Signature:Printed Name:			
Signature: Printed Name:			Faregr
			Ī
Signature: Printed Name:	Title:	AH	11
Signature:Printed Name:	Title:	9: 4.7 3T.6:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer		
If Florida General Partnership or Limited Liability Signature of one General Partner.	-		
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.			
Fces:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	JS 4 HER INVESTME				
(Must con	ntain the words "Limited Liab	oility Company, "L.L.	C" or "LLC.")		
ARTICLE II - Addres	ss:				
The mailing address and		principal office	of the Limited	Liability Cor	mnany ic
				. Zaomiy Cor	iipaity is.
Principal Office Addr	ess:	Mailing Ad	<u>ldress:</u>		
2351 W ATLANTIC BLV	<u>'D,#669494</u>	2351 W AT	LANTIC BLVD	<u>#669494</u>	
POMPANO BEACH, FL	33066				
POMPANO BEACH, FL ARTICLE III - Regist		POMPANO			
ARTICLE III - Regist (The Limited Liability Compan business entity with an active	tered Agent, Register by cannot serve as its own Re Florida registration.)	red Office, & Registered Agent. You π	egistered Age	mt's Signatur	: : : 2024.0.C
ARTICLE III - Regist (The Limited Liability Compan	tered Agent, Register by cannot serve as its own Re Florida registration.)	red Office, & Registered Agent. You π	egistered Age	mt's Signatur	136 120 136 120
ARTICLE III - Regist (The Limited Liability Compan business entity with an active	tered Agent, Register by cannot serve as its own Re Florida registration.)	red Office, & Registered Agent. You π	egistered Age	mt's Signatur	7 -3 024 00T -3
ARTICLE III - Regist (The Limited Liability Compan business entity with an active	tered Agent, Register by cannot serve as its own Re Florida registration.) da street address of th	red Office, & Registered Agent. You me	egistered Age	mt's Signatur	7 -3 024 00T -3
ARTICLE III - Regist (The Limited Liability Compan business entity with an active	tered Agent, Register by cannot serve as its own Re Florida registration.) da street address of th KRISTIE JONES Na	red Office, & Registered Agent. You me registered agent	egistered Age	mt's Signatur	7 -3 024 00T -3
ARTICLE III - Regist (The Limited Liability Compan business entity with an active) The name and the Florid	tered Agent, Register by cannot serve as its own Re Florida registration.) da street address of the KRISTIE JONES Na 2351 W ATLANTIC	red Office, & Registered Agent. You me me BLVD,#669494	egistered Age nust designate an ir nt are:	mt's Signatur	136 120 136 120
ARTICLE III - Regist (The Limited Liability Compan business entity with an active) The name and the Florid	tered Agent, Register by cannot serve as its own Re Florida registration.) da street address of th KRISTIE JONES Na	red Office, & Registered Agent. You me me BLVD,#669494 .O. Box NOT ac	egistered Age nust designate an ir nt are:	mt's Signatur	7 -3 024 00T -3

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ART		•	Y > 1
$A \cap I$	I 1. I	, H.	IV.

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

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	KRISTIE JONES 2351 W ATLANTIC BLVD,#669494 POMPANO BCH, FL 33066
Use attachment if necessary)	
EV: Other provisions if any	
EV: Other provisions if any	
EV: Other provisions, if any. ND ALL LAWFUL BUSINESS.	
E V: Other provisions, if any, ND ALL LAWFUL BUSINESS. EQUIRED SIGNATURE: Signature of a member or a	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ent to the Department of State constitutes a third degree fe
E V: Other provisions, if any. ND ALL LAWFUL BUSINESS. EQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S. KRISTIE.	with section 605.0203 (1) (b), Florida Statutes. I am aware ent to the Department of State constitutes a third degree fe
any false information submitted in a docume as provided for in s.817.155, F.S. KRISTIE	with section 605.0203 (1) (b), Florida Statutes. I am aware ent to the Department of State constitutes a third degree fe