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(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· -
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: HINTZ AND JON LLC
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Ryan Hint E (Comact Person)
Hintz and Jon LLL
(Firm/Company)
(Address)
NUVAILE FI 32544 (City. State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (470) 500 - 1414 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$150.00 Filing Fees and Certificate of Status \$180.00 Filing Fees and Certified Copy Certificate of Status
Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

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
Signed this 12th day of 00000	2029
Signature of Authorized Representative of-L	<u> </u>
Signature of Authorized Representative	
Signature of Authorized Representative: Printed Name: 7/1 / 11/12	Title: () U ~ 2 K
Signature(s) on behalf of Other Business Entity	y: [See below for required signature(s)]
Signature:	
Signature: RYAN ITINIZ	Title: OUNCK
Signatura	
Signature: Printed Name:	Title
Trinica ivano.	Thie.
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director,	or Officer.
If Directors or Officers have not been selected, an	Incorporator must sign.
If Florida General Partnership or Limited Lia	bility Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Lial Signatures of ALL General Partners.	bility Limited Partnership:
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIVILI ED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
Hintz and Jon UC (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:
NAVAVVE F1 32544 NOVAVVE F1 32544
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:
12 your Hintz Name
Florida street address (P.O. Box <u>NOT</u> acceptable)
Navayye FL 32566 City Zin

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)

A	R	TI	C	L	F.	I٦	Ι_

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

"AMBR" = Authorized Member	
"MGR" = Manager	RUAN HINTE
<u> </u>	
MB12 DWNER	Navayye A 32501,
21818	
MBI	
DWNER	
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	2400
(Use attachment if necessary)	
(Use attachment if necessary)	
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(Use attachment if necessary) LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lamaware the
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document is a document in a docum	
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lamaware the
Signature of a member or This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that mem to the Department of State constitutes a third degree felon
Signature of a member or This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lamaware the