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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(ON) Gueszipi None II)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Servined copies
Special Instructions to Filing Officer:



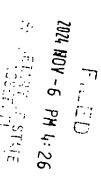


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COVER LETTER

Division of Corporations	
SUBJECT: JHP LLC	
	sulting Florida Limited Company)
	les of Organization, and fees are submitted to convert an "Other iability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:
Jonathan Krasney	
(Contact Person)	
JHP LLC	
(Firm/Company)	
17557 Ashbourne Way, Apt B	
(Address)	
Boca Raton, FL 33496	
(City, State and Zip Code)	
jonkrasney@gmail.com	
E-mail Address: (to be used for future annual rep	port notifications)
For further information concerning this mat	tter, please call:
Mark Schaum	at (561) 750-7575
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the l	int: (All checks processed by this office must be payable in US United States)
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	□S180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassec, 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: JHP LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
February 23, 2012
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
JHP LLC
(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 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 18th	day of September	20
Signature of Author	rized Representative of Limi	ted Liability Company:
	zed Representative:	
Signature of Authori	zed Representative:	<u> </u>
Printed Name: Jonath	an Krasney	Title: Manager
Signature(s) on beha	alf of Other Business Entity:	See below for required signature(s)
Signatura:		Title: Manager
Printed Names Joosth	an Krasnev	Title: Manager
Timed Name, Journal		
Signature:		
Printed Name:		Title:
	· 	
Signature:		
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
a:		
Signature:		Title:
Printed Name:		11tte:
Cianatura		
Printed Name:		Title:
rimed Name		
If Florida Corporati	ion:	
	n, Vice Chairman, Director, or	Otficer.
	rs have not been selected, an In	
If Florida General P	artnership or Limited Liabili	ty Partnership:
Signature of one Gen	eral Partner.	
	artnership or Limited Liabili	
Signatures of ALL G	eneral Partners.	
All others:		
Signature of an autho	rized person.	
Fees:		
Articles of C	onversion:	\$25.00
		\$125.00 \$125.00
	ida Articles of Organization:	
Certified Cop		\$30.00 (Optional)
Certificate of	Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

JHP LLC		
(Must contain the words "	Limited Liability Company, "L.L.C.," or "LLC,")	
ARTICLE II - Address: The mailing address and street addr	ress of the principal office of the Limited Liability Compa	any is:
Principal Office Address:	Mailing Address:	
17557 Ashbourne Way, Apt B	17557 Ashbourne Way, Apt B	
Boca Raton, FL 33496	Boca Raton, FL 33496	
(The Limited Liability Company cannot serve a business entity with an active Florida registrat The name and the Florida street add Jonathan Krasne		6- AON 1804
	Name	PH C
17557 Ashbourne	e Way, Apt B	 (
Florida street a	address (P.O. Box <u>NOT</u> acceptable)	26
Boca Raon	FL ³³⁴⁹⁶	
(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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

TANK = AUIDORIZEG Wiember	
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Jonathan Krasney
WOIX	17557 Ashbourne Way, Apt B
	Boca Raton, FL 33496
	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) CLE V: Other provisions, if any.	
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CLE V: Other provisions, if any. REQUIRED SIGNATURE:	
CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of	r ap authorized representative of a member
CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	e with section 605,0203 (1) (b). Florida Statutes, I am aware
CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	r ap authorized representative of a member se with section 605.0203 (1) (b), Florida Statutes, I am aware ument to the Department of State constitutes a third degree for
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	e with section 605,0203 (1) (b). Florida Statutes, I am aware
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document any false information submitted in a document is submitted in a document in submitted in submit	e with section 605,0203 (1) (b). Florida Statutes, I am aware

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)