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(Requestor's Name)
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PICK-UP WAIT MAIL
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SUBJECT:	$\left(\cdot \right)$) luss 1	one (Consultants esulting Florida Limit	24	2.6
· · · ·		(1)	Same of R	esulting Florida Limit	ed Com	pany)
						d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return	all corre	spondence	concerni	ng this matter to:		
Jaso	ύΛ	Jones				
Cluss	One	(Contact Pe	rson) tunts			
		(Firm/Com (D 055 -l l (Addres	pany)			
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Orlando	<u>F1.</u>	3283	2		_	
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				iatter, please call:		
Jusa	Λ	Jones		at (_702) 49	31 4767
(Name	e of Contac	et Person)		(Area Code)	(Day	time Telephone Number)
			_	ount: (All checks p e United States)	rocess	ed by this office must be payable in US
S150.00 Fili (\$25 for Conve & \$125 for Arti of Organization	rsion icles	S155.00 F and Certifica Status		□\$180.00 Filing and Certified Cop		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
	ing Addr					Address:
	Filing Sc sion of Co	ection orporations				filing Section on of Corporations
	Box 632					entre 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. The name of the "Other Business Entity" immediately prior to the filing of the Artic	cles o	f Conver	sion is:
(Enter Name of Other Business Entity)	_		
2. The "Other Business Entity" is a Limited Link. Link Comp (Enter entity type. Example: corporation, limited partnership, general partnership, comm	a M X	v or busing	ess trust, etc.
First organized, formed or incorporated under the laws of New York (Enter state, or if a non-U.S. entity, the			
on 12 16 2014 (date of organization, formation or incorporation)	مامند	CO O Fore	aniration.
3. The name of the Florida Limited Liability Company as set forth in the attached Ar		•	
(Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date:		EN 4: 54	لخدد⇔
(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 d 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			

- 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 13 day of January	_ ₂₀ _25
Signature of Authorized Representative of Lini	ted Liability Company:
Signature of Authorized Representative: Printed Name: Jasan Jones	Title: Munayel
Signature(s) on behalf of Other Business Entity: [
Signature: Asha Jones	Title: Managed
Signature:Printed Name:	70.7
Printed Name:	
Signature:Printed Name:	_ Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	(110) <u>"</u> "
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

2017 JUN 17 PN 4:54

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Lir	mited Liability Company is	S:	
(1455	One Consultants	L.L.C.	
(Mus	st contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")	-
ARTICLE II - Add The mailing address		principal office of the Limited	Liability Company is:
Principal Office A	ddress:	Mailing Address:	
13559 Nur Dilyndo Fi	(0055ce f.).	135 9123 Sanbrini Orlando F1 32	Drive 327
(The Limited Liability Co- business entity with an ac	onpany cannot serve as its own Regetive Florida registration.) Florida street address of the Asha June 1	<u> </u>	t's Signature: dividual or another
	Nar		:
	13554 Nullooss		- 17 A. 24 PH 4: 24 PH 4: 54
	Florida street address (P.	O. Box <u>NOT</u> acceptable)	- 1일 등 1일 5
	Drando	FI. 32832 Zip	िलिं क
	City	Zip	
liability compa	any at the place designated	to accept service of process for in this certificate. I hereby acce acity. I further agree to comply	pt the appointment as

(CONTINUED)

Registered Agent's Signature (REQUIRED)

	DEL			T T /
А	RTI	IC.I	, P.	IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Juson Jones. 9123 Santorin. Drive 01900 Fl. 32827
MGR	Ashu Jones 9123 Sunforini Dive 0.1 lundo Fl. 32827
····	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware tha ment to the Department of State constitutes a third degree felon
Ty	ped or printed name of signee Filing Fees

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)