P21000089374

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



600374760786

10/12/21--01057--005 **105.90

2121 0C) 12 PK 2: 20

COVER LETTER "

TO: New Filing Section Division of Corporations

SUBJECT: BBJ MANAGEMENT LLC

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

JULIUS MICHAELSON III
Contact Person
Firm/Company
4433 LEILA AVE
Address
TAMPA, FL 33616
City, State and Zip Code
INTIQUATE CONTOCTO CATALL CONT

JMICHAELSON225@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIUS MICHAELSON at 813 458-5399

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$105.00 Filing Fees □\$113.75 Filing Fees and Certified Copy and Status □\$122.50 Filing Fees. □\$122.50 Filing Fees.

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

Converting Eligible Entity

mo

Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607,11933 & 607,0202. Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
BBJ MANAGEMENT LLC
Enter Name of the Converting Entity
2. The converting entity is a LIMITED LIABILITY COMPANY
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)
on 09/27/2021
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> BBJ MANAGEMENT INC
Enter Name of Florida Profit Corporation
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.
5. If not effective on the date of filing, enter the effective date: 10/01/2020
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florid
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.

\$8.75 (Optional)

\$8,75 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: BBJ MANAGEMENT ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Mailing address, if different is: Principal street address 4433 W LEILA AVE JULIUS MICHAELSON TAMPA, FL 33616 ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY AND ALL LEGAL The number of shares of stock is: 1000 ARTICLE IV SHARES ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: JULIUS MICHAELSON Name and Title: 4433 W LEILA AVE Address: Address: TAMPA, FL 33616 Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address:

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:

JULIUS MICHAELSON

Äddress:

4433 W. LEILA AVE

TAMPA, FL 33616

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familias, with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

10/04/2021

Date

2121 OCT 12 PM 2: 20