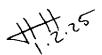
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(Req	questor's Name)	
(Add	lress)	
(Add	ress)	
(City	/State/Zip/Phone #)	
PICK-UP	WAIT MA	IL
(Bus	iness Entity Name)	
(Doc	ument Number)	
Certified Copies	Certificates of Status	
Special Instructions to F	iling Officer:	
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: JMO ACQUISITIONS LLC		
(Name of Resu	ulting Florida Limite	ed Company)
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lia	_	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	this matter to:	
MARC SAENZ		
(Contact Person)		
JMO ACQUISITIONS LLC		
(Firm/Company)		
9860 SW 131 STREET		
(Address)		
Miami FL 33176		
(City, State and Zip Code)		
Marcpsaenz@gmail.com		
E-mail Address: (to be used for future annual rep	oort notifications)	
For further information concerning this mat	ter, please call:	
Jessica Saiontz, Esq.	_at (374-5500
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoundollars and drawn on a bank located in the U	-	rocessed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S180.00 Filing and Certified Cop	-
Mailing Address:		Street Address:
New Filing Section		New Filing Section Division of Corporations
Division of Corporations P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		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 Articles of Conversion is: JMO ACQUISITIONS INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION
(Enter entity type. Example: corporation, 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)
September 18, 2024
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: JMO ACQUISITIONS 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.)
<u>Note:</u> 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.

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Signed this 17th day of DECEMBER	20
Signature of Authorized Representative of Limi	
indicate of functional representative or think	- Company
	A C
Signature of Authorized Representative:	man Salus
Signature of Authorized Representative:Printed Name: MARC SAENZ	Title: AUTH. REPRESENTATIVE
Signature(s) on behalf of Other Business Entity:	San balow for required signaturated
Obsullance by	see below for required signature(s)
7 - 1	
Signature: Mark Salus	· · · · · · · · · · · · · · · · · · ·
Printed Name: IV XX Consulting, Inc., Marc Saenz	Title: OFFICER/DIRECTOR
Signature:	
Signature:	
Printed Name: Caylak, LLC, Orhan Caylak	THE OFFICER/DIRECTOR
Printed Name: Caylak, LLC, Oman Caylak	_ fille: OFFICERODIKECTOR
Document by	
Signature:	
Printed Name: Triple Point Consulting, Inc., Loris River	a Title: OFFICER/DIRECTOR
Timed Times	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title
rimica Name.	TRIC
Signature:	
Signature: Printed Name:	Title:
If Florida Componetions	
If Florida Corporation:	0.00
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
lf Florida Gene <u>ral Partnership or Limited Liabili</u>	ty Partnershin
Signature of one General Partner.	ty Latticismp.
Signature of one General Partner.	
<u>lf Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
A 11 4 l	
All others:	
Signature of an authorized person.	
Fees:	
	225.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$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:	
JMO ACQUISITIONS LLC (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9860 SW 131 STREET	9860 SW 131 STREET
Miami FL 33176	Miami FL 33176
The name and the Florida street address of the re- Jessica Saiontz, Esq Name	gistered agent are:
610 Angelica Place Florida street address (P.O.	Box NOT acceptable)
Brandon	33510
City	Zip
liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete paccept the obligations of my position as regional complete.	accept service of process for the above stated limited this certificate. I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE 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			
AMBR	EagleCondor, LLC, Orhan Caylak as AR		
	1235 Gladstone Drive		
	Rockville, MD 20851		
ANADD	Triple Baiet Consulting Inc. Loris Bivers of	^ AD	
AMBR	Triple Point Consulting, Inc., Loris Rivera as AR		
	2309 SW 62 Ave Unit A		
	Miami FL 33155		
AMBR	IV XX Consulting, Inc., Marc Saenz, as AR		
	9860 SW 131 Street		
	Miami Florida 33176	;	
		DEC OFFI	
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		4 DEC 26 PH	
		— ————————————————————————————————————	
(Use attachment if necessary)		STATE 37.4711 6: 41	
• • •		<u> </u>	
ARTICLE V: Other provisions, if any.		· ·	
, , , , , , , , , , , , , , , , , , ,			
REQUIRED SIGNATURE:	-DocuSigned by:		
	hare Saenz		
('	•		
	-852A1B20E9974ED		

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

MARC SAENZ as Authorized Representative of IV XX Consulting, Inc.

Typed or printed name of signee

Filing Fees

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