L23000 241574

(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



500407378065

4.0742, L1 +01710 + 011 ++140.01

2023 1777 - 2 PM 2: 10

COVER LETTER

Division of (Corporations			
HAJAL'	S THOROUGHBREDS,	LLC.		
SUBJECT:	(Name of D	- 1-1 - 175 - 14 - 1 1	- 10	
	(Name of Re	sulting Florida Lir	nited Co	mpany)
The enclosed Article Business Entity" into	es of Conversion, Artic o a "Florida Limited L	cles of Organiza iability Compa	ition, ai ny" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corr	espondence concernir	g this matter to	:	
PHILLIP HAJAL				
HAJAL'S THOROL	(Contact Person) JGHBREDS, LLC.		_	
4360 NE 138TH PL	(Firm/Company)			
ANTHONY EL 20047	(Address)		_	
ANTHONY, FL 32617				
philhajal@gmail.com	City, State and Zip Code)		_	
E-mail Address: (to b	e used for future annual re	port notifications)	_	
For further informati	on concerning this ma	tter inlease calls		
Phillip Hajal		386 at (6638
(Name of Conta	ct Person)		e) (Day	rtime Telephone Number)
Enclosed is a check to dollars and drawn on	or the following amou a bank located in the	nt: (All checks United States)	proces	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐\$185,00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Add	ress:		Street	t Address:
New Filing Se	ection			Filing Section
Division of C				on of Corporations
P.O. Box 632	1		The C	Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section

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: HAJAL'S THOROUGHBREDS, INC.
(Enter Name of Other Business Entity)
CORPORATION
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country) 12/26/2003
on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: HAJAL'S THOROUGHBREDS, LLC.
(Enter Name of Florida Limited Liability Company)
5/15/23
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.
2023 HÀ:
가.
1 ; • >

Signed this 25 day of APRIL	20
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative: Printed Name: Phillip Hajal	Tiye: MGA
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:Printed Name: JOAN HAJAL	Title: PRES
Signature:	
	Title: CEO
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 If Directors or Officers have not been selected, an In	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Linkility Common	. •	
The name of the Limited Liability Company	y IS:	
HAJAL'S THOROUGHBREDS, LLC.		
	ability Company, "L.L.C.," or "LLC.")	·
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited	d Liability Company is:
Principal Office Address:	Mailing Address:	
4360 NE 138TH PL	SAME	
ANTHONY, FL 32617		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the server of th	egistered Agent. You must designate an in	ent's Signature: ndividual or another
PHILLIP HAJAL		
N	ame	
4360 NE 138TH PL		
Florida street address (F	P.O. Box NOT acceptable)	
ANTHONY	32617 FL	
City	Zip	
Having been named as registered agent an liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d in this certificate, I hereby acco pacity. I further agree to comply te performance of my duties, and	ept the appointment as with the provisions of al d I am familiar with and
Registered Agent's S	Signature (REQUIRED)	2023 HATT-
	/ \	V: 1
(CONT	INUED)	- D PH 2: I

ARTICLE IV-

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

A DUEST - BITTATION NAMED A	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	PHILLIP HAJAL
	4309 NE 137TH ST
	ANTHONY, FL 32617
MGR	JOAN HAJAL
	4360 NE 138TH PL
	ANTHONY, FL 32617
(Use attachment if necessary)	
Die V. Outer provisions, if any.	
REQUIRED SIGNATURE:	
	Hail
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. I am aware the ment to the Department of State constitutes a third degree felo
Signature of a member or This document is executed in accordance any false information submitted in a docur	with section 605,0203 (1) (b) Florida Statutes, Lam aware 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. PHILLIP HAJAL	with section 605,0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felo
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. PHILLIP HAJAL Typ	with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree feloped or printed name of signee Filing Fees
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. PHILLIP HAJAL Typ \$125.00 Filing Fee for Articles o	with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree feloped or printed name of signee Filing Fees f Organization and Designation of Registered A
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. PHILLIP HAJAL Typ	with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree feloped or printed name of signee Filing Fees f Organization and Designation of Registered A
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. PHILLIP HAJAL Typ \$125.00 Filing Fee for Articles o	ped or printed name of signee Filing Fees f Organization and Designation of Registered A s 5.00 Certificate of Status (Option)
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. PHILLIP HAJAL Typ \$125.00 Filing Fee for Articles o	ped or printed name of signee Filing Fees f Organization and Designation of Registered A s 5.00 Certificate of Status (Option)
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. PHILLIP HAJAL Typ \$125.00 Filing Fee for Articles o	ped or printed name of signee Filing Fees f Organization and Designation of Registered A s 5.00 Certificate of Status (Option)