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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Submoss Effect Humb)
(Document Number)
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J. BRYAN

MAY -1 2008

EXAMINER

COVER LETTER

TO: Registration S Division of C				
SUBJECT: Hawar		Florida Limited Company)	1	
	isiness Entity" into a "	ticles of Organization, Florida Limited Liabil		d to
Please return all corre	espondence concerning	g this matter to:		
Majid M. Hawari				
	(Contact Person)			
Hawari & Companies,				0
	(Firm/Company)			B ASIO
2103 W. Columbus Dri	ive			ガラ
	(Address)			30 F C
Tampa, FL 33607				08 APR 30 PM 2: 56
	City, State and Zip Code)			\(\frac{1}{2}\)
`	. ,			20
For further informati	on concerning this ma	tter, please call:		-
Majid M. Hawari		at (813) 249-	5541	
(Name of Conta	ct Person)		ytime Telephone Number)
Enclosed is a check f	or the following amou	ınt:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions	MAILING A Registration S Division of C P. O. Box 63:	Section Corporations 27	
Registration Section Division of Corporat	ions	Registration S Division of C	Section Corporations 27	

Tallahassee, FL 32301

$\frac{\textbf{Certificate of Conversion}}{For}$

"Other Business Entity" Into

Florida Limited Liability Company

	ttached Articles of Organization are submitted to
	ess Entity" into a Florida Limited Liability
Company in accordance with s.608.4	139, Florida Statutes.
	Entity" immediately prior to the filing of this
Certificate of Conversion is: Hawari & Companies, Inc.	#P99000022469
(Enter Nan	ne of Other Business Entity)
2. The "Other Business Entity" is a _	corporation .
(Enter entity type. Example: cor	poration, limited partnership, sole proprietorship, , common law or business trust, etc.)
general partnership	common law or business trust, etc.,
first organized, formed or incorporate	ed under the laws of Florida
(Enter state, or if a no	n-U.S. entity, the name of the country)
on 03/05/1999	
	ity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Bu under the laws of which it is now org	isiness Entity" was changed, the state or country anized, formed or incorporated:
No CHA	SGE.
4. The name of the Florida Limited L Articles of Organization:	ciability Company as set forth in the attached
Hawari Holdings, LLC	
(Enter Name of Fl	orida Limited Liability Company)

5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor m document is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days after the date the State; <u>AND</u> 2) must be the same a	is the	
Signed this 25th day of April	20_08		
Signature of Authorized Person:	Twant		
Printed Name: Majid M. Hawari Title	President / CEO		
Fees:	£25.00	08 APR 30 P	SIVISION OF COR
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	PM 2: 56	F STATE PORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabil	ity Company is:			
Hawari Holdings, LLC			=	ı
Must end with the words "Limited Liabil LLC.")	ity Company," the ab	breviation "L.L.C.," or the designation	on	
ARTICLE II - Address:				
The mailing address and street a Liability Company is:	address of the pr	rincipal office of the Limite	d	
Principal Office Address:		Mailing Address:		
2103 W. Columbus Drive		PO Box 291697		
Tampa, FL 33607	0	Tampa, FL 33687		
ARTICLE III - Registered Agesignature: The Limited Liability Company cannot sondividual or another business entity with an active Florida reg	erve as its own Registristration.)	tered Agent. You must designate an	ent's 08 APR	DIVISION
Majid M. Haw		egistered agent are.	R 30	N OF C
<u>,</u>	Name	a	异	JOŘP GŘÁTI
2103 W. Colu		-		SC S
Florida stre	et address (P.O.	Box NOT acceptable)	2: 56	ATION
Tampa,		FL 33607		S
	City State	e and Zin		

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) 608, E.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"RACID" — Managar	Name and Address:	
'MGR" = Manager 'MGRM" = Managing Member		
MGR	Majid M. Hawari	
	PO Box 291697	
	Tampa, FL 33687	

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	(Use attachment if necessary)	5
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of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)