# L15000/4020/

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
_	_	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Citing Officer	
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
15 AUG 13 PH 12: 00

n 08/20/15

#### **COVER LETTER**

	Division of C				
SUBJE	CT. GLOBAL	TEXUSA, LLC			
SODJE	···	(Name	of Resulting Florida Limit	ed Company)	
				nd fees are submitted to convert an accordance with s. 605.1045, F.S.	"Other
Please r	eturn all corre	espondence concernin	g this matter to:		
RAMAZ	AN PATAK				
		(Contact Person)			
	<u> </u>	(Firm/Company)			
915 NW	ISTAVEAPT				
MIAMI,	FL 33136	(Address)			
RAMAZ	(C AN@GLOBAL	City, State and Zip Code) I'EXUSA.COM			
E-mai	l Address: (to be	e used for future annual re	port notifications)		
For furt	her informatio	on concerning this ma	tter, please call:		
RAMAZ	AN PATAK		786 657-	4423	
	(Name of Conta	ct Person)		ytime Telephone Number)	
Enclose	d is a check for	or the following amou	ınt:		
(\$25 for C	00 Filing Fees Conversion or Articles zation)	\$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	
Registra Division Clifton l	T ADDRESS tion Section of Corporati Building secutive Center	ons	Registration	Corporations 327	

INHS11 (06/15)

Tallahassee, FL 32301

### **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 Ent GLOBALTEXUSA INC	tity" immediately prior to the filing of the Articles of Conversion	is:
(P15-052764) (Enter Nat	me of Other Business Entity)	
2. The "Other Business Entity" is a	RPORATION er entity type. Example: corporation, limited partnership,	
(Ente	er entity type. Example: corporation, limited partnership, eneral partnership, common law or business trust, etc.)	
First organized, formed or incorporated	under the laws of	
06/16/2015	(Enter state, or if a non-U.S. entity, the name of the country	<b>′</b> )
on   06/16/2015   (date of organization, formation or incorporation)	ation)	
<ol><li>The name of the Florida Limited Liab GLOBALTEXUSA, LLC</li></ol>	bility Company as set forth in the <b>attached Articles of Organiza</b>	ition:
(Enter Name of Flo	orida Limited Liability Company)	
(The effective date: 1) cannot be prior date this document is filed by the Flor date listed in the attached Articles of (	r to date of receipt or filed date nor more than 90 days after to date of receipt or filed date nor more than 90 days after to date of state; AND 2) must be the same as the effective date is listed therein.)  meet the applicable statutory filing requirements, this date will not be listed as State's records.	ective
,	oved in accordance with all applicable statutes.	2

Page 1 of 2

SECRETARY OF SATIONS OF CORPORATIONS OF CORPORATIONS OF CORPORATIONS

Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:  Printed Name: RAMAZAN PATAK	Title: MANAGER
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Signature: Printed Name: RAN PATAK	Title: PRESIDENT
Signature: Printed Name:	Title:
Signature:Printed Name:	Title
rimed Name.	Title.
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida Committee I to the Line in	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of one General Farmer.	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

Signed this  $\frac{5}{2}$  day of AUGUST  $\frac{15}{20}$ 

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE I - Name:</b> The name of the Limited Liability Company	is:		
GLOBALTEXUSA, LLC			
(Must end with the words "Limited Lie	ability Company.	"L.L.C.," or "LLC.")	<del> </del>
ARTICLE II - Address: The mailing address and street address of the	e principal off	ice of the Limited Liab	ility Company is:
Principal Office Address:	<u>Mailing</u>	Address:	
915 NW 1ST AVE APT H911	915 NW	IST AVE APT H911	
MIAMI, FL 33136	MIAMI,	FL 33136	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)  The name and the Florida street address of the	egistered Agent. Y	You must designate an individu	
	ic registered t	agent are.	
RAMAZAN PATAK	ame		
915 NW 1ST AVE APT H911 Florida street address (F		T acceptable)	
MIAMI	FL	33136	
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 certif pacity. I furth ete performan	ficate, I hereby accept the ner agree to comply with ce of my duties, and I an	ne appointment as n the provisions of a n familiar with and
Rasina	Pi-matura (DE	COLUBED	
Registered Agent's S	Signature (RE	QUIRED)	ON SEVICE
(CONT	(INUED)		AUG 1
Page	e 1 of 2		CORPORATION OF STALE

<u> Fitle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager MGR	RAMAZAN PATAK
	915 NW IST AVE APT H911
	MIAMI, FL 33136
	MATERIAL DESCRIPTION OF THE PROPERTY OF THE PR
MGR	SINAN KAYA
	915 NW IST AVE APT H911
	MIAMI, FL 33136
EV: Effective date, if other than the cetive date is listed, the date mu	the date of filing: (OPTION st be specific and cannot be more than five business
fective date is listed, the date mu	the date of filing: (OPTION ast be specific and cannot be more than five business tet the applicable statutory filing requirements, this date will not set ite's records.
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This document is executed in fam aware that any false information and the second secon	ber or an authorized representative of a member.  n accordance with section 605.0203 (1) (b), Florida Statutes.
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**ARTICLE IV-** . The name and address of each person authorized to manage and control the Limited Liability