L15000202671

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/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

W15 ww 59593

DECT 9 2015



000276493000

08/31/iS--01035--015 **iS0.00

15 KOV 20 ARTH: 17



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2015

(FE)

L FATEHALI

FRANK FATAHADI VALUE PIZZA INC. 750 PEARSON ST #306 DES PLAINES, IL 60016

SUBJECT: LC PIZZA 1 LLC Ref. Number: W15000059593

returned for the following correction(s):

We have received your document for LC PIZZA 1 LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II

Letter Number: 315A00019039

(1)

COVER LETTER

TO: Registration S Division of C		,	
SUBJECT:	CPi33al	of Resulting Florida Limite	d Company)
		-	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:	
Faruk	Fatehali		
Value P	Fatehali (Contact Person) 330 Inc. (Firm/Company) SON St. # (Address)		
	(Firm/Company)		
750 Pea	rson St. #	306	
- DI'	(Address)		
Des Plein	e IL. 6 City, State and Zip Code) hali egmail e used for future annual re	0016	
For Kiffing	hal! @gmil		
E-mail Address: (to b	be used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
		•	15-7663
(Name of Conta	ect Person)	_at (<u>841) </u>	15-7062 rtime Telephone Number)
	or the following amou		
\$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 ADDRES Registration Section	S:	MAILING A Registration	

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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: Value Pizza Inc. (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: LCP:33a LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.) 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.

Page 1 of 2

77 31th October		
Signed this day of My and	20_15	
Signature of Authorized Representative of Lin		س لــ
Signature of Authorized Representative: Printed Name: FARUK FATEHALT	Title: Managing	Mem
Signature(s) on behalf of Other Business Entity:	: See below for required signature(s)	
Signature: John Joshuli Printed Name: FARUK FATEHAL	J_Title: President	
Signature:		
Signature:Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:Printed Name:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of If Directors or Officers have not been selected, an I		
If Florida General Partnership or Limited Liab Signature of one General Partner.	pility Partnership:	
If Florida Limited Partnership or Limited Liabi Signatures of <u>ALL</u> General Partners.	ility Limited Partnership:	
All others: Signature of an authorized person.		
Gees:		

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan	ie:				
The name of the Lin	mited Liability Company is:				
LC Pizza	St end with the words "Limited Liabili	ty Company, "L.	L.C.," or "LLC.")		
ARTICLE II - Ad					
The mailing address	s and street address of the pr	incipal office	of the Limited Lia	ability Company	/ is:
Principal Office A	ddress:	Mailing A	ddress:		
1225 W. 4 Suite 50 West Palm		26 08 Chic	W. Petergo, IL 6	<u>ты</u> Ave, 60659	Suite 201
(The Limited Liability Co	egistered Agent, Registered impany cannot serve as its own Regist ctive Florida registration.)			dual or another	
The name and the F	Florida street address of the r	egistered age	nt are:	15 NOV	4
	Faruk Fat	ehali		20	* ***
	Name	,	· • • • • • • • • • • • • • • • • • • •		*6
	1225 W. 45 th Florida street address (P.O			and the second of the second o	en e
	West Palm Beach City	FL	33407 Zip		

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 605. F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Memb	Name and Address:
"MGR" = Manager MGR	Faruk Fatehali 750 Pearson St. #306
MGR_	Des Planes, Il. 60016
	6926 69th Way West Palm Beach, FL. 33409
(Use attachment if necessary) CLE V: Effective date, if other the	han the date of filing: (OPTIONAL)
CLE V: Effective date, if other the effective date is listed, the date 0 days after the date of filing.)	must be specific and cannot be more than five business day at meet the applicable statutory filing requirements, this date will not be listed f State's records.
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) The date inserted in this block does not's effective date on the Department of the CLE VI: Other provisions, if any	must be specific and cannot be more than five business day at meet the applicable statutory filing requirements, this date will not be listed f State's records.
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) The date inserted in this block does not it's effective date on the Department of the Ut. Other provisions, if any REQUIRED SIGNATURE:	must be specific and cannot be more than five business day of meet the applicable statutory filing requirements, this date will not be liste of State's records.
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) The date inserted in this block does not it's effective date on the Department of the	must be specific and cannot be more than five business day at meet the applicable statutory filing requirements, this date will not be listed f State's records.
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) The date inserted in this block does not it's effective date on the Department of the CLE VI: Other provisions, if any Signature of a mathematical and aware that any false constitutes a third degree	must be specific and cannot be more than five business day of meet the applicable statutory filing requirements, this date will not be lister of State's records. Lember ok an authorized representative of a member. The definition accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State

Page 2 of 2

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

ARTICLE IV-