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(Re	equestor's Name)	
(Ad	idress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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16 APR 15 PH 2: 04
SECRETARY OF STATE
ANALYSEE FINEING

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COVER LETTER

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Division of C			
SUBJECT: Mama Ho	oldings, LLC		
		of Resulting Florida Limite	ed Company)
			nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
Lindsay Miller			
	(Contact Person)		
Linder Law Group			
· · ·	(Firm/Company)		
1111 Brickell Ave Suite	2200		
	(Address)		
Miami, FL 33131			
(6	City, State and Zip Code)		
Larryinmiami@gmail.co	m		
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
Lindsay Miller		at $(\frac{305}{2})^{717-7}$	7100
(Name of Conta	ct Person)		ytime Telephone Number)
Enclosed is a check f	or the following amou	int:	
\$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 Division of Corporat Clifton Building 2661 Executive Cent	ions	MAILING A Registration of O Division of O P. O. Box 63 Tallahassee,	Section Corporations 27

Tallahassee, FL 32301

Articles of Conversion For "Other Business Entity" 16 APR 15 PH 2: 05 Into Florida Limited Liability Companion ETAR (OF STAIR TALL AHASSEF FLORIDA

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.

Mama Holdings, LLC	s Entity" immediately prior to the filing of the Articles of Conversion is:
(Ent	er Name of Other Business Entity)
2. The "Other Business Entity" is a	Limited Liablity Company
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorpor	ated under the laws of
June 21, 2006	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization; formation or inc	orporation)
3. The name of the Florida Limited	Liability Company as set forth in the attached Articles of Organization
Mama Holdings, LLC	
(Enter Name	of Florida Limited Liability Company)
	ing enter the effective date:
4. If not effective on the date of file	prior to date of receipt or filed date nor more than 90 days after the

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this	day of April	20_16	
	of Authorized Representative of Lin		FILED
	of Authorized Representative:	Title: Authorized Representative	16 APR 15 PM 2
Signature(s) on behalf of Other Business Entity:	See below for required signature	SECRETARY OF STATE (cs)
Signature: Printed Nar	ne: Lindsay Miller	Title: Authorized Representative	
	ne:		
Printed Nar	me:	Title:	
Signature: Printed Nar	me:	Title:	
Printed Nar	me:	Title:	
Signature: Printed Nar	me:	Title:	
Printed Nar	me:	Title:	
Signature o If Directors	Corporation: f Chairman, Vice Chairman, Director, coor Officers have not been selected, an I	Incorporator must sign.	
	f one General Partner.	mry rarmersmp.	
	Limited Partnership or Limited Liab iof <u>ALL</u> General Partners.	ility Limited Partnership:	
All others: Signature o	f an authorized person.		
Fees:			
Fee Cer	icles of Conversion: s for Florida Articles of Organization: tified Copy: tificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	FILED 16 APR 15 PH 2: 05
The name of the Limited Liability Company is:	16 APR 15 PM 2:00
Mama Holdings, LLC (Must end with the words "Limited Liabili	TALL AHASSEE FLORING
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
48 Palm Ave, Miami Beach, FL 33139	48 Palm Ave, Miami Beach, FL 33139
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the r	egistered agent are:
Limited Agent Services, LLC	
Name	3
1111 Brickell Ave Suite 2200	
Florida street address (P.O	. Box <u>NOT</u> acceptable)
Miami	FL 33131
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:	FILED 16 APR 15 PM S
"AMBR" = Authorized Member		" " 15 PH
"MGR" = Manager		TALECRETARY
MGR	Lawrence Feldman	SECRETARY OF S
		
		
		
(Use attachment if necessary) LE V: Effective date, if other than the factive date is listed, the date must		
LE V: Effective date, if other than the frective date is listed, the date must days after the date of filing.) The date inserted in this block does not meet affective date on the Department of States.	t be specific and cannot be most the applicable statutory filing require	ore than five business d
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LE V: Effective date, if other than the frective date is listed, the date must days after the date of filing.) The date inserted in this block does not meet as effective date on the Department of State LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membal This document is executed in a may a ware that any false information.	t be specific and cannot be most the applicable statutory filing require	ements, this date will not be rative of a member. (b), Florida Statutes.
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) The date inserted in this block does not meet is effective date on the Department of State LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membor This document is executed in 1 am aware that any false infor constitutes a third degree felor Lindsay Miller	et be specific and cannot be ment the applicable statutory filing require c's records. Der or an authorized represent accordance with section 605.0203 (1) remation submitted in a document to the	ements, this date will not be rative of a member. (b), Florida Statutes.

Page 2 of 2