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(Re	equestor's Name)	
. (Ad	dress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TANKE TO BE NOT THE SECOND

KANE AND KOLTUN

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS 150 Spartan Drive, Suite 100 - Maitland, Florida 32751

TELEPHONE: (407) 661-1177 • TELEFAX: (407) 660-6031

E-Mail: Lawoffices@kaneandkoltun.com

IRINA G. DOLINSKIY*** ELINA G. VALENTINE

***Also admitted in New York

Florida Board Certified in Wills, Estates and Trusts

STEVEN H. KANE**

*L.L.M. in Taxation

JEFFREY M. KOLTUN**

**Also admitted in Ohio and Kentucky

May 3, 2016

Registration Section **Division of Corporations** Post Office Box 6327 Tallahassee, Florida 32314

Articles of Conversion for Amana Holdings Corporation and Articles of Re: Organization for Amana Holdings, LLC

To Whom This May Concern:

Enclosed please find the following:

- 1. Articles of Conversion for Other Business Entity into Florida Limited Liability Company and Articles of Organization for Limited Liability Company.
- 2. A check in the amount of \$150.00 payable to the Department of State for the filing fee.

In addition, I have enclosed a self-addressed stamped envelope for return of any correspondence.

If you have any questions or comments, please contact our office.

Sincerely,

KANE AND KOLTUN ATTORNEYS AT LAW

Day Osborne-Chapman

Florida Registered Paralegal

Enclosures

COVER LETTER

	Registration S Division of Co				
SUBJE	CT: Amana Ho	oldings, LLC			
~		(Name	of Resulting Florida I	imited	(Company)
					I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please 1	return all corre	spondence concerning	g this matter to:		
Steven F	H. Kane, Esquire				
		(Contact Person)			
Kane an	d Koltun, Attorne	eys at Law			
		(Firm/Company)			
150 Spa	rtan Drive, Suite	100			
		(Address)			
Maitland	d, Florida 32751				
	(C	City, State and Zip Code)			
	e@kaneandkoltui				
E-ma	iil Address: (to be	used for future annual re	port notifications)		
For furt	ther informatio	on concerning this ma	tter, please call:		
Steven F	I. Kane		at ()	661-1	177
	(Name of Contac	et Person)		(Dayt	ime Telephone Number)
Enclose	ed is a check for	or the following amou	int:		
(\$25 for	.00 Filing Fees Conversion for Articles dization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing F and Certified Copy		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Registra Division Clifton 2661 Ex	ET ADDRESS ation Section n of Corporati Building xecutive Cente ssec, FL 3230	ons er Circle	Registra Division P. O. Bo	tion S of Co x 632	orporations

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.

(E	Enter Name of Other Business Entity)
2. The "Other Business Entity" is	Corporation .
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorpo	orated under the laws of Florida
05/24/2010	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or i	incorporation)
3. The name of the Florida Limit	ed Liability Company as set forth in the attached Articles of Organization:
Amana Holdings, LLC	
(Enter Nan	ne of Florida Limited Liability Company)
4. If not effective on the date of f	filing, enter the effective date:
	pe prior to date of receipt or filed date nor more than 90 days after the
date this document is filed by the date listed in the attached Artic	ne Florida Department of State; <u>AND</u> 2) must be the same as the effective eles of Organization, if an effective date is listed therein.) does not meet the applicable statutory filing requirements, this date will not be listed as the ment of State's records.

Page 1 of 2



Signed this 2nd day of May	20_16
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Soheila Mohammadian	Title: Manager
Signature(s) on behalf of Other Business Entity:	
(/1	
Signature: Printed Name: Soheila Mohammadian	Title: President
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
<u>If Florida General Partnership or Limited Liabili</u> 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	S:
Amana Holdings, LLC	
(Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8739 Windsor Pointe Drive	8739 Windsor Pointe Drive
Orlando, Florida 32829	Orlando, Florida 32829
The name and the Florida street address of the Steven H. Kane, Esquire	registered agent are:
Nan	ne
150 Spartan Drive, Suite 100	
Florida street address (P.	O. Box <u>NOT</u> acceptable)
Maitland	FL 32751
City	Zip
liability company at the place designated registered agent and agree to act in this capo statutes relating to the proper and complete accept the obligations of my position as r	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S
Registered Agent's Si	gnature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Soheila Mohammadian
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
(If an effective date is listed, the date must to or 90 days after the date of filing.)	the applicable statutory filing requirements, this date will not be listed as the 's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is executed in a I am aware that any false inforr	er or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State y as provided for in s.817.155, F.S.
Soheila Mohammadian	

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)
Page 2 of 2