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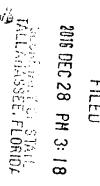
(Re	equestor's Name)	
(Ac	idress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nam	ne)
(Do	ocument Number)	·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

	gistration : vision of C	Section Corporations		
SUBJEC	Γ: East of U	si, LLC.		
	· ·	(Name	of Resulting Florida Limit	ed Company)
The enclose Business I	sed Article Entity" into	s of Conversion, Artic a "Florida Limited L	les of Organization, ar iability Company" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please retu	ırn all corr	espondence concernin	g this matter to:	
Gerard de N	IORMANDI	E ESQ		
		(Contact Person)		
LAWYERS	in USA PLI	LC		
*		(Firm/Company)	-	
13899 BISC	AYNE BLV	D Suite #110		
 		(Address)		
MIAMI FLO	ORIDA 3318			
	(1	City, State and Zip Code)	·	
LAWYERS	inUSA@gm	ail.com		
E-mail A	Address: (to b	e used for future annual re	port notifications)	
For further	r informati	on concerning this ma	tter, please call:	
Gerard de N	ORMANDI	3	at (305) 677 (0111
(N	ame of Conta	nct Person)		ytime Telephone Number)
Enclosed i	s a check t	or the following amou	int:	
\$150.00 (\$25 for Cor & \$125 for A of Organizat	nversion Articles	□\$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 Registration Division of Clifton But 2661 Executablesses	on Section of Corporatiliding cutive Cent	ions er Circle	MAILING A Registration Division of C P. O. Box 63 Tallahassee,	Section Corporations 27

INH\$11 (06/15)

FILED

2016 DEC 28 PM 3: 18

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

SEULLIARY OF STATE TALLAHASSEE, FLORIDA

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

(Enter Name of C	Other Business Entity)
2. The "Other Business Entity" is a CORPORA	TION
(Enter entity	type. Example: corporation, limited partnership, partnership, common law or business trust, etc.)
First organized, formed or incorporated under	the laws of FLORIDA
03/15/2004 (DOCHMENT# DOMOOOM5724)	(Enter state, or if a non-U.S. entity, the name of the country)
on (date of organization, formation or incorporation)	
EACTE ATTOM TICE	
EAST of US1, LLC. (Enter Name of Florida Lin	mited Liability Company)
(Enter Name of Florida Lin	
(Enter Name of Florida Lin 4. If not effective on the date of filing, enter the	
4. If not effective on the date of filing, enter the (The effective date: 1) cannot be prior to date this document is filed by the Florida Dedate listed in the attached Articles of Organ	ne effective date: 01/01/2017 nte of receipt or filed date nor more than 90 days after the epartment of State; AND 2) must be the same as the effective ization, if an effective date is listed therein.) e applicable statutory filing requirements, this date will not be listed as the
4. If not effective on the date of filing, enter the (The effective date: 1) cannot be prior to date this document is filed by the Florida Dedate listed in the attached Articles of Organ Note: If the date inserted in this block does not meet the	ne effective date: 01/01/2017 nte of receipt or filed date nor more than 90 days after the epartment of State; AND 2) must be the same as the effective ization, if an effective date is listed therein.) the applicable statutory filing requirements, this date will not be listed as the records

Page 1 of 2

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 26	day of DECEMBER	20_16	FILED
Signature of Aut	horized Representative of Lim	ited Liability Company	77 3016 DEC 28 PM 3: 18
Signature of Auth	orized Representative:	PARMILLET	SENSE JARY OF STATE JALLAHASSEE, FLORIDA
Signature(s) on be	ehalf of Other Business Entity:	[See below for required sign	ature(s)]
Signature: Printed Name: Gera	Copye	Title: PRESIDENT	
Signature: Printed Name:		Title:	
Signature: Printed Name:		Title:	
Signature: Printed Name:		Title:	
Printed Name:		Title:	
If Directors or Offi	ation: man, Vice Chairman, Director, or icers have not been selected, an In I Partnership or Limited Liabil	corporator must sign.	
Signature of one G		tty 1 at thei ship.	
If Florida Limited Signatures of ALL	l Partnership or Limited Liabili General Partners.	ity Limited Partnership:	
All others: Signature of an aut	horized person.		
Fees:			
		\$25.00 \(\sqrt{5}\) \$125.00 \(\sqrt{5}\) \$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:	
EAST of US1, LLC.	
(Must end with the words "Limited Liabil	ty Company, "L.L.C.," or "L.I.C.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
13899 BISCAYNE BLVD #110	Gerard C ZAOUI c/o LAWYERS in USA
	13899 BISCAYNE BLVD SUITE 110
MIAMI FL 33181	MIAMI FL 33181
(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	•
Gerard C ZAOUI	
Namo	
C/O LAWYERS in USA, 13899	BISCAYNE BLVD #110
Florida street address (P.O	Box NOT acceptable)
MIAMI	FL 33181
City	Zip
liability company at the place designated in registered agent and agree to act in this capact statutes relating to the proper and complete paccept the obligations of my position as reg	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 distered agent as provided for in Chapter 605, F.S
Page 1 o	12

ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member	er		
"MGR" = Manager			
MGR	Gerard C ZAOUI		
	13899 BISCAYNE BLVD #110		
	MIAMI FL 33181		
AMBR	Benjamin J ZAOUI		
	2450 NE 135 ST - APT 103		
	MIAMI FL 33181	29	
AMBR	Gerard-Claude ZAOUI	201 6 C	
MIDIC	2450 NE 135 ST - APT 103	西	
	MIAMI FL 33181	DEC 28	7
	MICHAEL SSTOT		FILE
	11	P	
	—————————————————————————————————————	ယ္	
		œ	
(Use attachment if necessary)			
A DIFFICIAL TO THE STATE OF THE	01/01/0015	• • • \	
	han the date of filing: $\frac{01/01/2017}{1}$. (OPTION	,	,
to or 90 days after the date of filing.)	must be specific and cannot be more than five business	s days p)1101
	of meet the applicable statutory filing requirements, this date will not	he listed :	as the
document's effective date on the Department o		Je Hated I	45 1116
ARTICLE VI: Other provisions, if any			
	no Jaons		
REQUIRED SIGNATURE:	Clambe		
. 	111 mps		
	tember or an arthorized representative of a member.		
This document is execut	ted in accordance with section 605.0203 (1) (b), Florida Statutes.		

Gerard-Claude ZAOUI

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)

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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