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(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasiness Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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T. BURCH SEP _ 7 2017

COVER LETTER

10:	Division of Co			
SUBJI	ECT:	A Meli (Name of Resi	a J Colle	Ction, LLC
				d fees are submitted to convert an "Other seordance with s. 605.1045, F.S.
Please	return all corre	spondence concerning	this matter to:	
	<u>Andrea</u> Amelia	(Contact Person) T Colle (Firm/Company)	ction, LLa treet, Sui	
	319 C	lematis S	treet, Sui	te 314
	West	Palm Bea City, State and Zip Code)	ich, TL =	33401 ection. com
For fu		on concerning this mat	•	
	And re (Name of Contact	a Streeter	at (<u>671)</u> (Area Code) (Day	345-4449 time Telephone Number)
		or the following amou a bank located in the U		ed by this office must be payable in US
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	OS185.00 Filing Fees, Certified Copy, and Certificate of Status
New F Division Clifton	ET ADDRESS Tiling Section on of Corporati Building Executive Cente	ons	MAILING A New Filing S Division of C P. O. Box 632 Tallahassee, I	ection orporations 27

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED

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rship

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: AMELIA J COLLECTION, LLC general
(Enter Name of Other Business Entity)
Amelia J Collection, LLC (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a Limited Liability Correpany, partnersh (Enter entity type. Example: corporation, limited partnership general partnership) common law or business trust, etc.) First organized, formed or incorporated under the laws of
First organized, formed or incorporated under the laws of
on January 8, 2016. (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Amelia J Collection, LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 9/1/2017
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the date this document is filed by the Florida Department of State.) 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.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 29th day of August	_20_14	
Signature of Authorized Representative of Limi	ted Diability Company:	
	111	
Signature of Authorized Representative: Printed Name: Andrea Streeter	Tille: Member / registered	
Signature(s) on behalf of Other Business Entity:	· · · · · · · · · · · · · · · · · · ·	
Signature: ACMUM		
Printed Name: Sata Khan	Title: Member / CEO	
Signature: Printed Name: 5ATA Khan Signature:		,
Printed Name: Andrea Streeter	Title: Member / Managing	Director
Signature:Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
Signature:	Tisla.	
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 Inc	corporator must sign.	
If Florida General Partnership or Limited Liabili	ty Purtnershin	
Signature of one General Partner.	ty raitmership.	
·		
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others:		
Signature of an authorized person.		
<u>Fees:</u>		
Amiala af Canana	\$25.00	
Articles of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$125.00	
Certified Copy:	\$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
//	
Amelia J Coll-	ection, LLC
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
319 Clematis Street Suite 316 Wist Palm Beach, FL 33401	319 Clematis Street Suite 316 West Palm Beach, FL 33401
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
Andrea Stree	ter
	Lake Circle #101
Florida street address (P.O.	
Wellington	FL 33411
'City	Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete particles accept the obligations of my position as regi	accept service of process for the above stated limited this certificate. I hereby accept the appointment as y. I further agree to comply with the provisions of all exformance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S
Registered Agent's Signa	iture (KEQUIKED)

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	Sair Khan	
AMBR	1169 Quaye Lake Circle #	
	Wellington, FL 33411	
AMBR	Andrea Streeter	
	Mellington, FL 33411	
	- Marington 1 - 2004 11	
		
	ST ST	
	- 6 AM	
(Use attachment if necessary)	<u></u>	
21 12 12		
CLE V: Other provisions, if any.		
REQUIRED SIGNATURE	Y 0 1 1	
This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony	
Andrea	Streeter	
T	ped or printed name of signee	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)

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

· . . .

ARTICLE IV-