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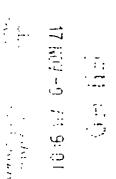
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(,,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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11/09/17--01024--002 **180.00



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COVER LETTER

Division of C	Corporations			
SUBJECT: BLOOM	ING AMERICA LLC			
SOBJECT.	(Name	of Resulting Flori	ida Limite	ed Company)
				and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to) :	
Cheyenne Moseley				
	(Contact Person)		_	
LegalZoom.com, Inc.				
	(Firm/Company)	<u>.</u>	_	
101 N. Brand Blvd., 11	ith Floor			
	(Address)	·		
Glendale, CA 91203				
((City, State and Zip Code)			
fachreim@gmail.com				
E-mail Address: (to b	e used for future annual re	port notifications)	
For further information	on concerning this ma	tter, please cal	l:	
Cheyenne Moseley		at (³²³	չ 962-	8600 ext 9724
(Name of Conta	ict Person)	_ \	le) (Day	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)	S155.00 Filing Fees and Certificate of Status	■\$180.00 Filing and Certified C		□\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRESS	S:			ADDRESS:
Registration Section	ions	_	stration .	
Division of Corporat Clifton Building	IOHS		Box 63	Corporations 27
2661 Executive Cent	er Circle			FL 32314

INHS11 (01/14)

Tallahassee, FL 32301

TO: Registration Section

Certificate of Conversion For

"Other Business Entity"

into

Florida Limited Liability Company

This Certificate of Conver	sion and attached Articles of C	Preanization are submitted	to convert the following
"Other Business Entity"	into a Florida Limited Liabilit	ty Company in accordance	with s.605,1045, Florida
Statutes.			•

The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversio BLOOMING AMERICA, INC.	n is:
(Enter Name of Other Business Entity)	
The "Other Business Entity" is a Corporation	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
rst organized, formed or incorporated under the laws of FL	
11/16/2012 (Enter state, or if a non-U.S. entity, the name of the country)	
(date of organization, formation or incorporation)	
The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization	оп:
LOOMING AMERICA LLC	
(Enter Name of Florida Limited Liability Company)	
If not effective on the date of filing, enter the effective date: he effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the te this document is filed by the Florida Department of State; AND 2) must be the same as the effective date in the attached Articles of Organization, if an effective date is listed therein.)	t tive
The plan of conversion has been approved in accordance with so 605 1041-605 1046	

Page 1 of 2

17 NOTE - 9 - 27 OF 10 O

Signed this 30 day of October	_201=
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Fadi Chroim	Title: Member
Signature(s) on behalf of Other Business Entity: [
Signature: Your Ct House Printed Names Basma Elaret	Title: President
Signature: Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature: Printed Name:	_ Title:
Signature:Printed Name:	Tist
Signature: Printed Name:	Title;
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of If Directors or Officers have not been selected, an Inc.	Officer.
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnerable;
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)

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limit	ed Liability Con	npany is:	
	BLOOM	ING AMERICA LLC	
(Must co	d with the words "Lis	mited Liability Company, "L.L.C.," or "LL	C.")
ARTICLE II - Addre	AS:		
_		of the principal office of the Lir	nited Liability Company is:
Principal Office Addu	ress:	Mailing Address:	
11360 NW 22 Street		11360 NW 22 Street	
Plantation, FL 33323		Plantation, FL 33323	
ARTICLE III - Regis The Limited Liability Compar business entity with an active	ny campnot serve as its	egistered Office, & Registered own Registered Agent. You must designat	Agent's Signature: e an individual or another
The name and the Flori	da street addres	s of the registered agent are:	
Fac	# Chreim		
		Name	_
<u>113</u>	60 NW 22 Street		
Flo	orida street addr	ess (P.O. Box NOT acceptable)	_
Play	ntation	FL 33323	_
	City	Zip	
liability company of registered agent and of statutes relating to the	nt the place design agree to act in the he proper and co ions of my position	ent and to accept service of proce gnated in this certificate, I hereby his capacity. I further agree to co complete performance of my dutie. Son as registered agent as provide ant's Signature (REQUIRED)	v accept the appointment as imply with the provisions of all s, and I am familiar with and
	(C	ONTINUED)	17 No

Page 1 of 2

The name and address of each person Company:	authorized to manage and control the	· Linuico i	
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
AMBR	Fadi Chreim		
	11360 NW 22 Street		_
	Plantation, FL 33323		_
AMBR_	Basma Elaref		
	11360 NW 22 Street		_
	Plantation, FL 33323		_
			_
			_
· · · · · · · · · · · · · · · · · · ·			_
			_
effective date is listed, the date must I	date of filing:	(OPTI	ONAL
(Use attachment if necessary) CLE V: Effective date, if other than the effective date is listed, the date must led days after the date of filing.) CLE VI: Other provisions, if any.	date of filing:	(OPTI	ONAL
CLE V: Effective date, if other than the effective date is listed, the date must I 0 days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	be specific and cannot be more than	five busin	ness da
CLE V: Effective date, if other than the effective date is listed, the date must I 0 days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	or an authorized representative of (b), Florida Statutes, the execution of the of perjury that the facts stated he demitted in a document to the Denartm	a membe	r.
CLE V: Effective date, if other than the effective date is listed, the date must I 0 days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member in accordance with section 605.0203 (1) onstitutes an affirmation under the penal arm aware that any false information sub	or an authorized representative of (b), Florida Statutes, the execution of the of perjury that the facts stated he omitted in a document to the Department of the original of	a membe	r.
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