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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:	

Office Use Only



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COVER LETTER

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO: New Filing Section Division of Corporations

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.

AMERICAN HALAL FOUNDATION, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>CORPORATION</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of TLLINOIS
(Enter state, or if a non-U.S. entity, the name of the country)
on JULY 10 2012 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
AMERICAN HALAL FOUNDATION, LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (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 day of	_ 20 /2
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: MOHAMMAD MAZHAR HVSSA	Willie PRESIDENT
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Mussain	
Printed Name: MOHAMMAD ABBULLAH HUSSA	Inte: MANAGING PARTNER
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	
Signature:Printed Name:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
<u>Íf Florida Limited Partnership or Limited Liabilit</u> Signatures of <u>ALL</u> General Partners.	
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

AMERICAN HALAL FOUNDATION, LLC.
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:	
10502 BERMUDA ISLE DRIVE TAMPA, FL- 33647	10502 BERMUDA ISLE DRIVE TAMPA, FL-33647	
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:	
MOHAMMAD MAN	IZHAR HUSSAINI	
10502 BERM Florida street address (P.O.	ODA ISLE DRIVE Box NOT acceptable)	
TAMPA City	FL 33647 Zip	
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete po	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	

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Membe	Name and Address:
"MGR" = Manager	
AMBR_	MOHAMMAD MAZHAR HUSSAINI
	10502 BERMUDA ISLE DRIVE TAMPA FL-33647
	,
MGR	MOHAMMAD ABBULLAH HUSSA.
	18003 COZUMEL TILE DRIVE
	TAMPA, FL- 33647
(Use attachment if necessary)	
(Ose attachment if necessary)	
LE V: Other provisions, if any.	60 %
MAHAMMAD A	BDULLAH HUSSAINI 40%
DEQUIDED CLONATURE	
REQUIRED SIGNATURE:	DAH
	(Job) (useaun .

ARTICLE IV-

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)

Typed or printed name of signee