L1800443920

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nar	ne)
(Do	ocument Number)	,
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		ļ

Office Use Only



800314200398

08/08/18--01026--011 **150.00

FILE 1.20

MOON 1 2 2018

COVER LETTER

Division o	f Corporations			
SUBJECT:		OUMANA ulting Florida Limited Con		
	cles of Conversion, Articl nto a "Florida Limited Li	les of Organization, and	d fees are submitted to c	
Please return all c	orrespondence concerning	g this matter to:		
<u>Gian</u>	(Contact Person) ese-Pittm (Firm/Company)	an, P.A.		
	BISCOUPLE (Address)		⊃0-1 U	18 JU
Sgiane E-mail Address: ((City, State and Zip Code) See See Proposed for future annual reports to be used for future annual reports to be used.	TTMAN. (com	4-8 PM 7: 20
	ation concerning this mat	-	_	20
Severino (Name of Co	Sianese-Pittma	Oat (305) (Day	122 - 59 8 V	2
	ck for the following amou on a bank located in the		sed by this office must b	e payable in US
\$150.00 Filing Fe (\$25 for Conversion & \$125 for Articles of Organization)	and Certificate of Status	□S180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDR New Filing Section Division of Corporal Clifton Building 2661 Executive C	on orations	MAILING A New Filing S Division of C P. O. Box 63 Tallahassee,	ection Corporations 27	

Tallahassee, FL 32301

Articles of Conversion

For

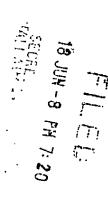
"Other Business Entity"

Into

Florida Limited Liability Company

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 Husiness Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on 2/22/18 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
JOUMANA, 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 fisted 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



Signed this day of blau	20 <u>18</u>
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Printed Name: MCOUP SOCIALIS	Title: Harrie V
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: Manuel Gold Gold Gold Gold Gold Gold Gold Gol	Title: President
Signature:Printed Name:	Tisla
rimed Name.	
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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)

18 JUN - 8 PH 7: 20

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
JOUM (Must contain the words "Limited Liability	Company, "L.L.C.," or "LI.C.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
100 N. BISCAYNE Blvd. Suite 3070 Miani, FL 33132	100 N. Biscaupe Blud. Suite 3070 KIIGMII, FC 331
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
<u>Gianese</u> -	Pittman, P.A.
100 N. BISCO Florida street address (P.O.	Box NOT acceptable)
Miami City	FI. 33/32- Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate. I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S
Registered Agent's Signal	

<u>Title:</u> "AMBR" = Authorized Memberships "MGR" = Manager	Name and Address:
MGR	Manuel Gordillo 9 Lot LES HAUTS DEST SATURN Saint Saturnin LES Avignon F
MGR	Insaf Gordillo 8445 9 LOT ES HAUTS DE ST SATURNI
	Saint Saturnin, LES Avignon FR 8445
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE: Signature of a membranes of a	er or an authorized representative of a member ordance with section 605.0203 (1) (b), Florida Statutes, I am aware that a document to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member This document is executed in account any false information submitted in	ardance with section 605.0203 (1) (b), Florida Statutes. I am aware that a document to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member This document is executed in account any false information submitted in	redance with section 605.0203 (1) (b), Florida Statutes. I am aware that a document to the Department of State constitutes a third degree felony Typed or printed name of signee
REQUIRED SIGNATURE: Signature of a membratis document is executed in account false information submitted in as provided for in s.817.155, F.S.	Typed or printed name of signee Filing Fees icles of Organization and Designation of Registered Agent

ARTICLE IV-