# 11800218275

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

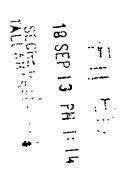
Office Use Only

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### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Charles Mich	naels Firm LLC
(Name of Resu	ulting Florida Limited Company)
	es of Organization, and fees are submitted to convert an "Other ability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	this matter to:
Milad Awadallah (Contact Person)	
(Contact Person)	
(Firm/Company)	· · · · · · · · · · · · · · · · · · ·
9005 NW 70th Ct	
Parkland FL 3306  (City, State and Zip Code)	16 SEP 13 PH 1: 14
(City, State and Zip Code)	
Miladawadallah @ gma	1.com
E-mail Address: (to be used for future annual rep	
For further information concerning this mat	ter, please call:
Milad Awadallah (Name of Contact Person)	at (954) 598 1794
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amoundollars and drawn on a bank located in the t	nt: (All checks processed by this office must be payable in US United States)
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  □\$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 ADDRESS:	MAILING ADDRESS:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314
Z001 EXCURIVE CERREL CHERC	1 d11d11d55CC, 1 L - D2D14

Tallahassee, FL 32301

## **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.

1. The name of the "Other Business 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 LC (Sole propliate 154.)  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of South Caroling (Enter state, or if a non-U.S. entity, the name of the country)
on June 10th 2017 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Charles Michaels Fin 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 12th day of September	20_18		
Signature of Authorized Representative of Limit	ted Liability Company:		
Signature of Authorized Representative: Printed Name:			
Signature(s) on behalf of Other Business Entity:	See beloy/for required signature(s)		
Signature: Printed Name: Michael Grandia	Title: General Pertner		
Signature: Gad Chumberd	Title: General Partne;		
Signature: Printed Name: Milad Awadallax	Title: General Perforer		
Signature:Printed Name:			
Signature:Printed Name:	Title:		
Signature:Printed Name:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.			
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	<b>=</b>	
All others: Signature of an authorized person.		VII XEE	18 SEP
Fees:		2.	- 🗔 👙 - ગ
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	<b>G</b>	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Charles Michaels Firm L (Must contain the words "Limited Liability Company, "L.L.C.," or "	L.C.")
ARTICLE II - Address: The mailing address and street address of the principal office of the	Limited Liability Company is:
Principal Office Address: Mailing Address	<u> </u>
Good Nw 70th (f Good No Parkland FL 33067 Parkland 7	W 70th Ct =L 33067
ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered Agent. You must desibusiness entity with an active Florida registration.)	red Agent's Signature: gnate an individual or another
The name and the Florida street address of the registered agent are:	
Milai Awadallah Name	
Name	
9005 NW 70th Ct	
Florida street address (P.O. Box NOT acceptal	
City Sip	067
City Zip	<del></del>
Having been named as registered agent and to accept service of pro- liability company at the place designated in this certificate, I her registered agent and agree to act in this capacity. I further agree to statutes relating to the proper and complete performance of my deaccept the obligations of my position as registered agent as pro-  Registered Agent's Signature (REQUIRED)  (CONTINUED)	reby accept the appointment as to comply with the provisions of all uties, and I am familiar with and vided for in Chapter 605, F.S

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Michael Gandia 11333 Lakeview Dr Colal Sermas FC 32071
AMBR	Fact Avadallah 905 NW JOH CH Pakkars FL 33067
AMBR	Milad Anadallal Goos New 70th (+ Parkley FL 33067
<del></del>	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	<del></del>
This document is executed in accordance	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 felor

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)