119000104098

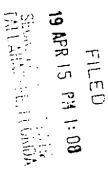
(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100327522051

U4/15/19--01035--028 **150.00



N CULLIGATI APR 24 2019

COVER LETTER

TO: New Filing So Division of C				
	•			
SUBJECT:PUNC	OSH, LLC	sulting Florida Limi		
	(Name of Kes	uiting Florida Limi	tea Con	npany)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
ALANI SOHAN				
	(Contact Person)		_	
PUNOSH, LLC				
	(Firm/Company)		_	
1946 NE 149th Street				
	(Address)		_	
North Miami, FL 33181				
((City, State and Zip Code)		_	
Punoshinc@gmail.com	•			
E-mail Address: (to b	e used for future annual re	port notifications)	_	
For further information	on concerning this ma	tter, please call:		
ALANI SOHAN		_at (\916- 9	9434
(Name of Conta	ct Person)	ar ((Area Code	_ <i>)</i>) (Day	/time Telephone Number)
	or the following amou a bank located in the		process	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□S180.00 Filing and Certified Co		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAIL	ING A	ADDRESS:
New Filing Section		New F	iling S	ection
Division of Corporati	ions			Corporations
Clifton Building	C: 1	P. O. E		
2661 Executive Cent	er Circle	I allah:	assec,	FL 32314

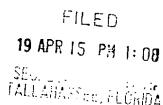
Tallahassee, FL 32301

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.

 The name of the "Other Business Entity" immediately pr PUNOSH, INC. 	rior to the filing of the Articles of Conversion is:
(Enter Name of Other Business E	ntity)
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partne	rship, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of(Enter	FEBRUARY 2, 2012
(Ente	er state, or if a non-U.S. entity, the name of the country)
FEBRUARY 7, 2012	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as s	et forth in the attached Articles of Organization:
PUNOSH, LLC	
(Enter Name of Florida Limited Liability C	Lompany)
4. If not effective on the date of filing, enter the effective date	ate:
(The effective date: Cannot be prior to date of receipt or the date this document is filed by the Florida Department	
Note: If the date inserted in this block does not meet the applicable stat document's effective date on the Department of State's records.	utory filing requirements, this date will not be listed as the
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 which such members are entitled under ss. 605.1006 and 60	

Signed this <u></u>	1TH da	ıy of APRIL	20 19
			mited Liability Company:
o:		a A	tio Colland
Signature of A	uthorized	Representative:	Title MANAGING MEMBER
Printed Name:	ALANI C. S	OHAN •	Title: MANAGING MEMBER
Signature(s) o	n Behalf o	Other Business Entity	See below for required signature(s)
~ (C	Drog /		
Signature: 🕰	TALANIC SI	Z MIKUM	Title: PRESIDENT
Printed Names	ADAM C. S	211011	Title: FRESIDENT
Signature:			
Printed Name:			Title:
Signature:			Title:
Printed Name:			Title:
Signature			
Printed Name:	·		Title:
			
Signature:			
Printed Name:			Title:
Signatura			
Printed Name:			Title:
rimea riame.			/ n.c
<u>If Florida Cor</u>			
-		ice Chairman, Director,	
If Directors or	Officers ha	ive not been selected, an	Incorporator must sign.
lf Florida Cer	ieral Parti	uership or Limited Lial	nility Partnershin
Signature of or			only ratticismp.
<u> </u>			
			pility Limited Partnership:
Signatures of A	VLL Gener	al Partners.	
All others:			
Signature of ar	n authorized	l person	
		- potoon.	
Fees:			
Article	s of Conve	ersion:	\$25.00
Fees fo	or Florida /	Articles of Organization	
	ed Copy:	Č	\$30.00 (Optional)
Certifi	cate of Sta	tus:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	PUNOSH, LLC		
(Must o	contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addr	race.		
		principal office of the Limited	l Liability Company
-			, , , , , , , , , , , , , , , , , , ,
Principal Office Add	dress:	Mailing Address:	
1946 NE 149th Street		1946 NE 149th Street	
North Miami, FL 33181		North Miami, FL 33181	
North Miami, FL 33181	istared Agent Devicto		mt's Signature.
ARTICLE III - Reg The Limited Liability Comp	pany cannot serve as its own Re	North Miami, FL 33181 red Office, & Registered Age egistered Agent. You must designate an i	
ARTICLE III - Reg	pany cannot serve as its own Re	red Office, & Registered Age	
ARTICLE III - Reg The Limited Liability Comp business entity with an acti	pany cannot serve as its own Re	red Office, & Registered Age	ndividual or another
ARTICLE III - Reg The Limited Liability Comp business entity with an acti	pany cannot serve as its own Reve Florida registration.) orida street address of the	red Office, & Registered Age	ndividual or another
ARTICLE III - Reg The Limited Liability Comp business entity with an acti	pany cannot serve as its own Reve Florida registration.) orida street address of the ALANI C. SOHAN	red Office, & Registered Age	ndividual or another
ARTICLE III - Reg The Limited Liability Comp business entity with an acti The name and the Flo	pany cannot serve as its own Reve Florida registration.) orida street address of the ALANI C. SOHAN Na	red Office, & Registered Age egistered Agent. You must designate an i	ndividual or another
ARTICLE III - Reg The Limited Liability Comp business entity with an acti The name and the Flo	pany cannot serve as its own Reve Florida registration.) orida street address of the ALANI C. SOHAN No. 149th Street	red Office, & Registered Age egistered Agent. You must designate an i	ndividual or another
ARTICLE III - Reg The Limited Liability Comp business entity with an acti The name and the Flo	pany cannot serve as its own Reve Florida registration.) orida street address of the ALANI C. SOHAN No. 149th Street	red Office, & Registered Age egistered Agent. You must designate an i	ndividual or another
ARTICLE III - Reg The Limited Liability Comp business entity with an acti The name and the Flo	pany cannot serve as its own Reve Florida registration.) orida street address of the ALANI C. SOHAN No. 149th Street	red Office, & Registered Age egistered Agent. You must designate an i	ndividual or another

Registered Agent's Signature (REQUIRED

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
MGR	ALANI C. SOHAN		
	1946 NE 149Th Street		
	North Miami, FL 33181		
			
	-	= 6/2	
			ق
		4.5	ΑPR
		- "	
	-	- ;-	S
	-		7
(Use attachment if necessary)		-	_
• /		7(iiv.) 7(iiv.)	: 08
		<u> </u>	ဆ
CLE V: Other provisions, if any.			
<u> </u>			
REQUIRED SIGNATURE:	\sim		
REQUIREDS IGNATURE:	/)		
GTALLEO (C)			
——————————————————————————————————————			
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am	T awara th	n t
any talse information submitted in a docu-	ment to the Department of State constitutes a third de	aware in gree felo	at ny
as provided for in s.817.155, F.S.	,	<u> </u>	

ALANI C. SOHAN

Typed or printed name of signee

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)