LP00071149

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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U4/U1/19--U1U18--U2/ **52.5U

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2019 AUG 23 AM 8: 07 SECRETARY OF STATE

COVER LETTER

	ng Section of Corporations		
SUBJECT:	Amannah II	1: LLC	
	Amagnah (Name of Re	esulting Florida Limited Con	ipany)
			d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all	correspondence concerni	ng this matter to:	
Moha	mmad Malik (Contact Person)		
	(Firm/Company)	•	
797 S	E Lighthouse 1	4ve	
Port	E Lighthouse (Address) St. Lucie, F2 (City, State and Zip Code)	34983	
muslik	32 @ gmail.com		
For further infor	rmation concerning this m	atter, please call:	
Moham (Name of	mad Malik Contact Person)	at (112) 32 (Area Code) (Day	13-5888 rtime Telephone Number)
	neck for the following amove on a bank located in the		sed by this office must be payable in US
\$150.00 Filing (\$25 for Conversio & \$125 for Articles of Organization)		☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADD New Filing Sect Division of Cor Clitton Building 2661 Executive Tallahassee, FL	tion porations } Center Circle	MAILING A New Filing S Division of C P. O. Box 63 Tallahassee,	ection Corporations 27



April 8, 2019

MOHAMMAD A. MALIK 797 SE LIGHTHOUSE AVE PORT ST. LUCIE, FL 34983

SUBJECT: AMAANAH, INC Ref. Number: W19000035388

We have received your document for AMAANAH, INC and your check(s) totaling \$52.50. However, the document has not been filed and is being retained in this office for the following:

The incorrect form was submitted to our office. Please remail with the attached form filled out in its entirety.

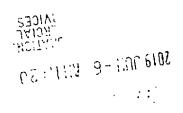
As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 519A00006965





June 19, 2019

MOHAMMAD A. MALIK 797 SE LIGHTHOUSE AVE PORT ST. LUCIE, FL 34983

SUBJECT: AMAANAH, INC Ref. Number: W19000035388

We have received your document for AMAANAH, INC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by an authorized person.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 519A00006965

Jessica A Fason Regulatory Specialist II

www.sunbiz.org

DO DOY GOOD TO U.S.

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 Business Entity" immediately prior to the filing of the Articles of Conversion is: Anamh Inc.
Amagnah 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 FL (Enter state, or if a non-U.S. entity, the name of the country)
on i/3/2017 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Amagnah LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: \(\lambda \rangle \frac{1}{2019}\). (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 4th day of June	_ 20 <u>_ 19</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Mohammad Halik	Title: President
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Mohammad Malik	Title: President
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
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;
If Florida Limited Partnership or Limited Liability Signatures of ALL. General Partners.	ty 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LÍABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:
Amagnah LLC	
(Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the I	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
797 SE Lighthouse Ave Port St. Lucie, FL 34973	797 SE Lighthouse Ave Port St. Lucie, FL 34983
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.)	ed Office, & Registered Agent's Signature: distered Agent. You must designate an individual or another

The name and the Florida street address of the registered agent are:

Mohammad Malike
Name

797 SE Lighthouse Ave

Florida street address (P.O. Box NOT acceptable)

Port St. Lucie FL 34983

City Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	Mohammad Malle
	797 SE L'apthouse Aug
	Port St. Lucie, FC 34983
AMBR	Tayraba Malik
74.10	797 SE Lighthouse Ave
	Brt St. Lucie, FL 34983
	
(Use attachment if necessary)	
LE V : Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member
	with section 605.0203 (1) (b), Florida Statutes. I am aware t
	ment to the Department of State constitutes a third degree fel
as provided for in 8.817.155, F.S.	Mari
Mohammad	Mahk
F13	1
Ty	rped or printed name of signee
	ped or printed name of signee Filing Fees of Organization and Designation of Registered