L19000267/17

(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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W19-90102

COVER LETTER **

Division of Co	rporations				
SUBJECT: HOOKA G	ALAXY LLC				
30bJEC1	(Name of Resi	ılting Florida Limit	ed Com	npany)	
The enclosed Articles Business Entity" into a	of Conversion, Articl a "Florida Limited Lia	es of Organizati ability Company	on, and	d fees are submitted to convert an "Othe coordance with s. 605,1045, F.S.	r
Please return all corres	spondence concerning	this matter to:			
ADDARLIN DISHMEY [DE LA ROSA				
	(Contact Person)	-			
HOOKA GALAXY LLC					
-	(Firm/Company)				
2230 S STATE ROAD 7	•				
-	(Address)		•		
MIRAMAR, FL 3302					
(C	ity, State and Zip Code)				
amigosfs@comcast.net					
E-mail Address: (to be	used for future annual rep	port notifications)	•		
For further informatio	n concerning this mat	tter, please call:			
ENNIO BERMUDEZ		at (709-5	5340	
(Name of Contac	t Person)	(Area Code	(Day	ytime Telephone Number)	
Enclosed is a check for dollars and drawn on a			rocess	sed by this office must be payable in US	,
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	■\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS New Filing Section Division of Corporation Clifton Building 2661 Executive Center	ons	New F Divisio P. O. E	iling S on of C Box 63:	ADDRESS: Section Corporations 527 FL 32314	

Tallahassee, FL 32301

TO: New Filing Section

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.

HOOKA GALAXY CORP (Enter Name of Other Business Entity)	
CORPORATION	
2. The "Other Business Entity" is a	
First organized, formed or incorporated under the laws of	me of the country)
04/07/2016	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Article	es of Organization:
HOOKA GALAXY 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 of	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 we document's effective date on the Department of State's records.	/ill 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 any members having appraisal	rights the amount to
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	F 6
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	19 X (
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	F 19 NOV
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	FIL 19 NOV -6 SELVING TAVE FALL PARASSE
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	FILED 19 NOV -6 PM SEURETACT CO

	Signed this 08 day of 26	20_19			
	Signature of Authorized Representative of Limite	d-Liability Company:			
	Signature of Authorized Representative: Printed Name: CARLOS VILLEGAS	Title: AMBR			
	Signature(s) on behalf of Other Business Entity: [S	ee below for required signature(s)}			
 >	Signature: X SU Printed Name: CARLOS VILLEGAS	Title: AMBIL			
	Signature:Printed Name:	Title:	•		
	Signature:		-		
	Signature:Printed Name:	Title:			
	Signature:Printed Name:	_ Title:	- 選出	19	
			(·	AON N	
	Signature:Printed Name:	Title:		~	"[]
			<u>SS</u>	9	
	Signature:			2	ΕD
	Printed Name:	_ Title:	- 7	7:	•
			골 ³	 ⊌⊓	
	If Florida Corporation:	Micer	35	on.	
	Signature of Chairman, Vice Chairman, Director, or Clif Directors or Officers have not been selected, an Inc.	omorator must sign.			
	If Directors or Officers have not been selected, an me	orporator mass angles			
	If Florida General Partnership or Limited Liabilit	y Partnership:			
	Signature of one General Partner.				
	· ·				
	If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:			2.7
	Signatures of ALL General Partners.		`		23
	All others:				2010 007 22
	Signature of an authorized person.				~ (V)
	Fees:				P.1 12: 56
		625.00	-		~5
	Articles of Conversion:	\$25.00 \$125.00		•	5
	Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Optional)			(A)
	Certified Copy:	\$5.00 (Optional)			
	Certificate of Status:	φυ.ου (Optional)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:	
HOOKA GALAXY LLC		
(Must contain the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
2230 S STATE ROAD 7	2230 S STATE ROAD 7	
MIRAMAR, FL 33023	MIRAMAR, FL 33023	
		<u> </u>
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the serve and the Florida street address of the serve and the Florida street address.	ne registered agent are:	n individual or another
ADDARLIN DISHMEY DE LA	A ROSA ame	
183	ame	
2050 N 57TH TERR		
Florida street address (I	P.O. Box NOT acceptable)	
HOLLYWOOD	FL 33021	
City	Zip	
<u> </u>	d in this certificate, I hereby a pacity. I further agree to com ete performance of my duties, c	ccept the appointment as ply with the provisions of all and I am familiar with and

•	IJΓ	ПΤ	<i>(</i> '')	1	 IV-
			٦.I	1	 , y -

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

"AMBR" = Authorized Member	
"MGR" = Manager AMBR	ADDARLIN DISHMEY DE LA ROSA
Zimuri	2050 N 57TH TERR
	HOLLYWOOD, FL 33021
	26 S
	<u> </u>
	ric
(Use attachment if necessary)	E.C
	ラン・ファイン ラン・ファイン ラン・ファイン ラン・ファイン ラン・ファイン ファイン ファイン ファイン ファイン ファイン ファイン ファイン
CLE V: Other provisions, if any.	; > `

REQUIRED SIGNATURE:

(A Dorh

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

ADDARLIN DISHMEY DE LA ROSA

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)