# L200000 42660

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)
PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





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SECRETARY OF STATE

## COVER LETTER

<b>TO:</b> New Filing S Division of C			
SUBJECT: Mahapa I	•		
SUBJECT:	(Name of Res	ulting Florida Limited 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:	
Samuel L. LePrell			
	(Contact Person)		
Samuel L. LePrell, Attor	ney and Counselor at Law		
	(Firm/Company)		
1930 San Marco Boulev	ard, Suite 201, St. Mark's I	lace	
_	(Address)		
Jacksonville, Florida 322	207		
((	City. State and Zip Code)		
samleprell@bellsouth.ne	:t		
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter. please call:	
Sam LePrell		_at ()_390-2	2705
(Name of Conta	act Person)	(Area Code) (Day	time Telephone Number)
	or the following amou a bank located in the		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	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAILING A	ADDRESS:
New Filing Section		New Filing Section	
Division of Corporations		Division of Corporations	
Clifton Building	0. 1	P. O. Box 63	
2661 Executive Center Circle		Tallahassee, 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.

1. The name of the "Other Business Entity" immed Mahapa Enterprise Inc.	diately prior to the filing of the Articles of Conversion is:
(Enter Name of Other I	Business Entity)
2. The "Other Business Entity" is a corporation	Pl80000 OGI 45] ited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limi	ited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the la	aws of
	(Enter state, or if a non-U.S. entity, the name of the country)
July 16, 2018	
on July 16, 2018 (date of organization, formation or incorporation)	
	pany as set forth in the attached Articles of Organization:
Mahapa Enterprise, LLC	
(Enter Name of Florida Limited	Liability Company)
4. If not effective on the date of filing, enter the eff	
the date this document is filed by the Florida De	eccipt or filed date nor more than 90 calendar days after partment of State.)
Note: If the date inserted in this block does not meet the appl document's effective date on the Department of State's record	licable statutory filing requirements, this date will not be listed as the ls.
5. The plan of conversion has been approved in acco	ordance with all applicable statutes.

- 5. The plan of conversion has been approved in accordance with an 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 15th day of January	20_20
Signature of Authorized Representative of Limi	- · <del></del>
Signature of Authorized Representative:	Tamaren.
Printed Name: Amit Gurmukh Pardasani	Title: Manager, President
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Man Vadesani	
Signature: Anit Gurmukh Pardasani	Title: President and Director
Signature:Printed Name:	Title:
Timed Name.	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Circumstance.	
Signature:Printed Name:	Title
Timed Name.	
Signature:	
Printed Name:	Title:
<del></del>	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ter Domenouskins
Signature of one General Partner.	ty rai thership.
Signature of one General Farance.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
	Trial /

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Mahapa Enterprise, L	LLC		
		flity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ac		principal office of the Limited Liability Com	
Principal Office Address:		Mailing Address:	
5140 Blanding Boulevard		5140 Blanding Boulevard	
Jacksonville, Florida 32210			
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Re- active Florida registration.)	ed Office, & Registered Agent's Signature gistered Agent. You must designate an individual or another	
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Re- active Florida registration.)  Florida street address of the	ed Office, & Registered Agent's Signature gistered Agent. You must designate an individual or another to registered agent are:	
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Researcher Florida registration.)  Florida street address of the Rohit S. Makhijani	ed Office, & Registered Agent's Signature gistered Agent. You must designate an individual or another to registered agent are:	
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Researcher Florida registration.)  Florida street address of the Rohit S. Makhijani	ed Office, & Registered Agent's Signature gistered Agent. You must designate an individual or another to registered agent are:	
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Refractive Florida registration.)  Florida street address of the Rohit S. Makhijani  Na 9162 Timbermill Court	ed Office, & Registered Agent's Signature gistered Agent. You must designate an individual or another to registered agent are:	
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Refractive Florida registration.)  Florida street address of the Rohit S. Makhijani  Na 9162 Timbermill Court	ed Office, & Registered Agent's Signature gistered Agent. You must designate an individual or another e registered agent are:	

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-

Amit Gurmukh Pardasani

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		
MGR. P	Amit Gurmukh Pardasani	
	7820 Baymeadows Road East, Apt. 526	
	Jacksonville, Florida 32256	
MGR, S, T	Rohit S. Makhijani	
	9162 Timbermill Court	
	Jacksonville, Florida 32256	
MGR, VP	Ramesh Harjani	
	3412 Russett Place	
	Landolakes, Florida 34638	
<del></del>		
(Use attachment if necessary)		
LE V: Other provisions, if any.		
REQUIRED SIGNAȚURE:		
Amer Somoles and		
They Sometis and		
Signature of a member or	an authorized representative of a member	
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware	
	iment to the Department of State constitutes a third degree for	
	iment to the Department of State constitutes a third degre	

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)