

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	. <u></u> .
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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#### **COVER LETTER**

10:	New Filing S Division of C				
SUBJ	ECT:	JO	ROMA, LLC		
	_		sulting Florida Limit	ed Con	npany)
The er Busine	nclosed Articless Entity" int	es of Conversion, Artic o a "Florida Limited Li	les of Organization	on, an	nd fees are submitted to convert an "Other ecordance with s. 605,1045, F.S.
Please	return all cor	respondence concernin	g this matter to:		
		IMAD ODEH			
		(Contact Person)			
		JORORMA INC	<u>_</u>		
		(Firm/Company)			
		3221 NE 9TH ST			
		(Address)			
		ANO BEACH, FL 330	062		
	(	City, State and Zip Code)			
		<u>D@SVMTODAY.CO</u>			
t:-m	all Address: (to)	be used for future annual re	port notifications)		
For fu	ther informat	ion concerning this ma	tter, please call:		
		ODFH	at ( 708	. 2	03-6666
	(Name of Cont				time Telephone Number)
		for the following amount a bank located in the	•	rocess	sed by this office must be payable in US
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	155.00 Filing Fees and Certificate of Status	□\$180,00 Filing and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add	ress:		Street	Address:
	New Filing S	lection		New I	Filing Section
	Division of C P.O. Box 631				on of Corporations Centre of Tallahassee
	Tallahassee,				N. Monroe Street, Suite 810
					nassee, FL 32303

### **Articles of Conversion**

For

# "Other Business Entity"

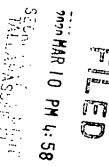
Into

## 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 pame of the "Other Rusingse Farity" immediately prior to the filling of the Agiel of Convention in
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 LIMITED LIABILITY COMPANY (P20 - P255) (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on 1/20/20 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
JOROMA, 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 2nd day of February	20_20
Signature of Authorized Representative of Limit	_
Signature of Authorized Representative:	Title: Hamper AMBR
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)
Signature: CINDI ODEH	Title:PMBC
Signature: Frinted Name: FMAD ODEH	
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 Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y 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 LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	vis:		
JOROM	IA, LLC		
(Must contain the words "Limited Lic	ability Company. "	L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address: The mailing address and street address of th	e principal off	ice of the Limit	ed Liability Company is:
Principal Office Address:	<u>Mailing</u>	Address:	
221 NE 9TH ST POMPANO BEACH, FL 33062		SAME	
The name and the Florida street address of t	he registered a	gent are:	
<del></del>	ame	<u>.</u>	
3221 NE	E 9TH ST		
Florida street address (	P.O. Box <u><b>NO</b></u> T	[ acceptable)	
POMPANO BEACH	FL	33062	
City	_	Zip	
Having been named as registered agent ar liability company at the place designate registered agent and agree to act in this car statutes relating to the proper and comple accept the obligations of my position as Registered Agent's S	ed in this certific pacity. I furthe ete performanc s registered ag	cate, Thereby acer agree to compe of my duties, a ent as provided j	ccept the appointment as ply with the provisions of all and I am familiar with and

# ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	DUUTCH INC.
	3221 NE 9TH ST.
	Pompano Beach, FL 33062
AMBR	IMMLINC.
	3221 NE 9TH ST.
	Pompano Beach, FL 33062
	<del>-</del>
MGR	MIKE ODEH
	3221 NE 9TH ST.
	Pompano Beach, FL 33062
(1)	
(Use attachment if necessary)  LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felor
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605,0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo
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Signature of a member or This document is executed in a docur as provided for in s.817.155, F.S.  City	with section 605.0203 (1) (b). Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felometric flower of the Department of State constitutes a third degree felometric flower of the Department of State constitutes a third degree felometric flower flower of State constitutes a third degree felometric flower