L21000 190852

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
☐ PICK-JP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
W21000058336

Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

EASTSIDE TAMPA	DELI LLC			
	- · · · · · · · · · · · · · · · · · · ·			
 -	·			
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
			·	Merger File
			·	Art, of Amend, File
		;		RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
				Vehicle Search
				Driving Record
Requested by: SETH	04/27/21			UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
Mr. 11 - F .				UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

TO: New Filing Section Division of Corporations	•	
SUBJECT: Eastside Tampa Deli LLC		
	sulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Articles Business Entity" into a "Florida Limited L	cles of Organizati liability Company	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concernir	ng this matter to:	
Roohi Tariq Chaudhry		
(Contact Person)		
EastsIde Tampa Deli LLC		
(Firm/Company)		
3402 N. 15th Street	- · · · · · · · · · · · · · · · ·	
(Address)		
Tampa, FL 33605		
(City, State and Zip Code)		
chfarook2004@gmail.com		
E-mail Address: (to be used for future annual re	eport notifications)	
For further information concerning this ma	itter, please call:	
Roohi Tariq Chaudhry	at (⁸¹³	546-8283
(Name of Contact Person)	(Area Code)	546-8283 (Daytime Telephone Number)
Enclosed is a check for the following amor dollars and drawn on a bank located in the	unt: (All checks p	rocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\begin{align*} \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop	Fees S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassec, FL 32314

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:

East Tampa Deli & Grocery Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation P190005706 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
7/11/2019 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Eastside Tampa Dell 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.

) .
			$\overline{}$	Liability Company:
Signatur	e of Authoriz	ed Representative:	())\$,'
Printed N	iame; Roohl Ti	ariq Chaudhry	Ti	tle: MGR
<u>Signatur</u>			Entity: [See	below for required signature(s)]
Signaturo	; \\	KS.		
Printed N	łame: Roohi T	ariq Chaudhry	T	tle: President
		_		
Signature	o:			itle:
Printed N	√ame:		Т	itle:
Signature	a •			
Printed N	 √ame:		T'	itle:
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Signature	o:			
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	:		
Eastside Tampa Dell LLC			
(Must contain the words "Limited Liability	ity Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the pr	principal office of the Limited Liability Company is	:	
Principal Office Address:	Mailing Address:		
3402 N. 15th St. Fampa, FL 33605	3402 N. 15th St. Tampa, FL 33605		
ARTICLE III - Registered Agent, Registered The Limited Liability Company cunnot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	stered Agent. You must designate an individual or another		
Roohi Tariq Chaudhry			
Name	,e		
3402 15th St.			
Florida street address (P.O.). Box NOT acceptable)		
Tampa	Zip		
City	Zip		
registered agent and agree to act in this capacistatutes relating to the proper and complete paccept the obligations of my position as reg	to accept service of process for the above stated limite in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of a performance of my duties, and I am familiar with anagistered agent as provided for in Chapter 605, F.S	all	
Registered Agent's Sign	nature (REQUIRED)		
(CONTIN	NUED)		

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Roohl Tariq Chaudhry
	3402 N. 15th St.
	Tampa, FL 33605
AMBR	Mohamed Ahmed Ghamry Abdelghafar
	3402 N. 15th St.
	Tampa, FL 33605
	
(Use attachment if necessary)	
ICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
1.0885	
Signature of a mank or a	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that
any false information submitted in a docur	ment to the Department of State constitutes a third degree felony
as provided for in s.817.155, F.S.	som to the population of State constitutes a time degree felony
Roohi Tariq Chaudhry	
Ty	ped or printed name of signee
	Filing Fees
\$125.00 Filing Fee for Articles o	of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Option:	al) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-