12000229490

(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



200387958762

05/20/22--01012--022 **150.00

CORPORATE

When you need ACCESS to the world

ACCESS, _ INC.

1.

2.

3.

6.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

•		WALK IN
	PICK	SUP: <u>5/20 DANNY</u>
	CERTIFIED COPY	
XX	РНОТОСОРУ	
	CUS	
XX	FILING	CONVERSION
1.	Pidari llc	
	(CORPORATE NAME AND DOCUM	MENT #)
2.	(CORPORATE NAME AND DOCUM	MENT #)
3.	(CORPORATE NAME AND DOCUM	MENT#)
4.		
	(CORPORATE NAME AND DOCUM	AENT #)
5 . _	(CORPORATE NAME AND DOCUM	MENT #)
6	(CORPORATE NAME AND DOCUM	MENT #)
SPECIAI INSTRUC	CTIONS:	

COVER LETTER

TO: New Filing Sec Division of Co					
SUBJECT: PIDARI LI	_C				
	(Name of Res	ulting	, Florida Limite	ed Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corres	spondence concerning	g this	s matter to:		
Anthony Holmes					
	(Contact Person)				
Registered Agent Soluti	ons, Inc.				
	(Firm/Company)				
5301 Southwest Pkwy.,	Suite 400				
	(Address)				
Austin, TX 78735					
(Ci	ty. State and Zip Code)	<u> </u>			
lida@pidari.com					
E-mail Address: (to be	used for future annual rep	ort n	otifications)		
For further information	n concerning this mat	ter, p	olease call:		
Anthony Holmes		at (888)	705-7	274
(Name of Contact	Person)	_a. ((Area Code)	(Day	time Telephone Number)
Enclosed is a check fo dollars and drawn on a	r the following amou bank located in the l	nt: (A Unite	All checks pr		ed by this office must be payable in US
(\$25 for Conversion	□\$155.00 Filing Fees and Certificate of Status		180.00 Filing F Certified Copy		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address New Filing Section of Co	rporations		ī I	New F Divisi	Address: iling Section on of Corporations
P.O. Box 6327			٦	The C	entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 23, 2022

CORPORATE ACCESS

SUBJECT: PIDARI LLC

Ref. Number: W22000067868

PH 2:28

We have received your document for PIDARI LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Neysa Culligan Regulatory Specialist III

Letter Number: 622A00011734

www.sunbiz.org

Color of Constant and D.O. DOV COOR JE 11 1 2001

Articles of Conversion For "Other Business Entity"

2022 HAY 25 AM 8: 15

FILED

SECRETARY OF STATE TALLAHASSEE, FL

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" immediately prior to the filing of the Articles of Conversion is: PIDARI LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (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)
08/31/2021 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:
PIDARI 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 20th day of May	20
Signature of Authorized Representative of Lim	ited Liability Company
	2 TOWOD
Printed Name: Lida Tohidi	Title: Member
Signature(s) on bahalf of Other Business Entitus	IS as halow for many indicates (*)
Signature(s) on behalf of Other Business Entity:	(See below for required signature(s)
Signature:	
Printed Name: Lida Tohidi	Title: Member
Signature:	7:1
Printed Name:	I itle:
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature: Printed Name:	Title
Timed Name.	ritic.
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation:	0.07
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
p	
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PIDARI LLC (Must contain the words "Limit	ed Liability Company, "L.L.C" or "LLC.")	
ADTICLE II. Address.		
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Lia	bility Company is:
	2	onny company is:
Principal Office Address:	Mailing Address:	
101 SW 64th Ave	101 SW 64th Ave	
Pembroke Pines, FL 33023	Pembroke Pines, FL 33023	
ARTICLE III - Registered Agent, Re	gistered Office, & Registered Agent's	Signature:
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an individu	lual or another
(The Limited Liability Company cannot serve as its of business entity with an active Florida registration.)	own Registered Agent. You must designate an individual of the registered agent are: utions, Inc.	lual or another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an individu	hual or another 2022 HAY 25 FALL AHAS
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an individual of the registered agent are: utions, Inc. Name	lual or another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address Registered Agent Sol 155 Office Plaza Dr.,	own Registered Agent. You must designate an individual of the registered agent are: utions, Inc. Name	TALLAHASSEE,
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address Registered Agent Sol 155 Office Plaza Dr.,	own Registered Agent. You must designate an individual of the registered agent are: utions, Inc. Name Suite A	TALL AHASSE

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)

A	D	TI	C^{\dagger}	f	IV	
А	к				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	111
AMBR	Lida Tohidi
	101 SW 64th Ave
	Pembroke Pines, FL 33023
	AH
	
(Use attachment if necessary)	<u>ـ</u> الآمام
(Use attachment if necessary)	
•	<u>ـ</u> الآمام
(Use attachment if necessary) LE V: Other provisions, if any.	<u>ـ</u> الآمام
•	<u>ـ</u> الآمام
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	<u>ـ</u> الآمام
LE V: Other provisions, if any. REQUIRED SIGNATURE:	2 TOWAS
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu	2 TOWAS
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, Lamaware the
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lamaware the
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S. Lida Tohidi	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lamaware the