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(Requestor's Name)	
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PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Condition Consider Control Condition of Control	
Certified Copies Certificates of Status	·
Special Instructions to Filing Officer:	
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SLORE JARY OF STATE

COVER LETTER

Division of Corporations			
SUBJECT: LIGHTHOUSE HOLDINGS OF	NWFL, INC.		
	sulting Florida Limi	mited Company)	
The enclosed Articles of Conversion, Articles Business Entity" into a "Florida Limited L	iability Company	ny" in accordance with s. 605.1045, F.S.	"Other
Please return all correspondence concerning	ig this matter to:) :	
JENNIFER H. COPUS, ESQ.			
(Contact Person)		_	
COPUS & COPUS, P.A.			
(Firm/Company)		_	
25 WALTER MARTIN ROAD NE, SUITE 200			
(Address)		_	
FORT WALTON BEACH, FL 32548			
(City, State and Zip Code)			
JENNIFER@COPUSLAW.COM			
E-mail Address: (to be used for future annual re	eport notifications)		
For further information concerning this ma	atter, please call:	l:	
JENNIFER H. COPUS, ESQ.	_at (609-1433	
(Name of Contact Person)	(Area Code	de) (Daytime Telephone Number)	
Enclosed is a check for the following amou dollars and drawn on a bank located in the	•		in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Cop		
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	##10:42

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" immediately prior to the filing of the Articles of Conversi LIGHTHOUSE HOLDINGS OF NWFL, INC.	ion is:
LIGHTHOUSE HOLDINGS OF NWFL, INC. (Enter Name of Other Business Entity)	0000
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business	s trust, etc.)
First organized, formed or incorporated under the laws of FLORIDA	_
(Enter state, or if a non-U.S. entity, the name of the cour	ntry)
04/12/2023 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organ	ization:
LIGHTHOUSE HOLDINGS OF NWFL, 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 da	ıys after
the date this document is filed by the Florida Department of State.)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	d 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 an which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	nount to

Signed this day of MAY	20_23
•	
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: ZIAD "MIKE" MUBARAK	Title: INCORPORATOR/MGR
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: 3	
Signature:	Title: INCORPORATOR/PRESIDENT
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty 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 is:	
The hame of the Emitted Elability Company is.	
LIGHTHOUSE HOLDINGS OF NWFL, LLC	
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
727 MAYFLOWER AVENUE	727 MAYFLOWER AVENUE
FORT WALTON BEACH, FL 32548	FORT WALTON BEACH, FL 32548
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
COPUS & COPUS, P.A.	
Name	
25 WALTER MARTIN ROAD	NE, SUITE 200
Florida street address (P.O	. Box NOT acceptable)

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)

FORT WALTON BEACH

City

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR - Manager	MUBARAK FAMILY REVOCABLE TRUST
<u> </u>	727 MAYFLOWER AVENUE
	FORT WALTON BEACH, FL 32548
	
(Lies attachment if necessary)	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
EE V. Outer provisions, it may.	
·	
REQUIRED SIGNATURE:	
3 a	
Signature of a member	or an authorized representative of a member
	ince with section 605.0203 (1) (b), Florida Statutes. I am aware
any false information submitted in a do as provided for in s.817.155, F.S.	ocument to the Department of State constitutes a third degree fe
ZIAD "MIKE" MUBARAK	
	Typed or printed name of signee
	Filing Fees

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)