# L24000482773

(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

W24000139540 11/15/24



100437456931

10/04/24==01015==013 \*\*185.00

ATTREENBY OF STATE

TILL DIN 7: 3





RECEIVED
2024 MOV 15 PM 2:23
WALLAL

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2024

MAHA HOURAN 4674 TOWN CENTER PKWY APT 305 JACKSONVILLE, FL 32246 US

SUBJECT: HELLOTUT LLC Ref. Number: W24000139540

We have received your document for HELLOTUT LLC and check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A signature and a printed name must be provided on behalf of the "Other Business Entity" Hellotut LLC that was formed in Delaware. Please place the missing signature and printed name on the designated line.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Monique K Anderson Regulatory Specialist II

Letter Number: 624A00022550

SIME SIME

## 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 Hellotut LLC	Entity" immediately prior to the filing of the Articles of Conversion is:
	r Name of Other Business Entity)
2. The "Other Business Entity" is a	
(Enter entity type. Example:	corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorpora	ted under the laws of [Enter state, or if a non-U.S. entity, the name of the country]
September 4, 2024 on	
(date of organization, formation or inco	rporation)
3. The name of the Florida Limited	Liability Company as set forth in the attached Articles of Organization:
Hellotut LLC	
(Enter Name o	of Florida Limited Liability Company)
(The effective date: Cannot be price the date this document is filed by the	s not meet the applicable statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been a	approved in accordance with all applicable statutes.
	Entity" has agreed to pay any members having appraisal rights the amount to inder ss. 605.1006 and 605.1061-605.1072. F.S.

Signed this 23 day of September	20	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative:	P	
Signature of Authorized Representative:	Title: Owner	
Signature(s) on behalf of Other Business Entity:		
Signature:		
Signature: Maha Hawan	_ Title: C. WARC	•
Signature:		
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	Officer	
If Directors or Officers have not been selected, an Inc		
If Florida General Partnership or <u>Limited Lia</u> bi <u>li</u>	ty Partnarchin	
Signature of one General Partner.	cy rai dicismp.	
If <u>Florida Limited Partnership or Limited Liabil</u> i	ty Limited Partnership	
Signatures of ALL. General Partners.	ty istince tarthership.	
All others:		
Signature of an authorized person.		Γλ.
Γ		
Fees:		AS.2
Articles of Conversion:	\$25.00	
Fees for Florida Articles of Organization:	\$125.00	70
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)	35. 17.
2 <del></del>	The state of the s	ודות ("בורים

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:	
Hellotut LLC		
(Must contain the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	of the principal office of the Limited Liability Comp  Mailing Address:	any is:
The mailing address and street address of		any is:
The mailing address and street address of Principal Office Address:	Mailing Address:	any is:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Northwest Register	ed Agent LI	LC	ĮΆ.	2[	
Nam	e		[	2024 NOA	
7901 4th St N	STE 300		ASS		
Florida street address (P.C	). Box <u><b>NO</b></u>	$\underline{\mathbf{T}}$ acceptable)	in Services	5	
St. Petersburg	FL_	33702	77.5	P <b>X</b>	į
City		Zip	TATE ORID	7: 3	
			370	డు	

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-

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 — Wallaget	Maha Houran
<del></del>	
	<del></del>
AMBR	Maha Houran
<del></del>	
(Use attachment if necessary)	
•	
LE V: Other provisions, if any.	Ā.
	<del></del>
	رن. برن
REQUIRED SIGNATURE:	m s
	D FX
	7 - ORE
	Ort >
This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am awai ment to the Department of State constitutes a third degree
any false information submitted in a docu as provided for in s.817.155, F.S.	
as provided for in s.817.155, F.S.  Maha Houran	
as provided for in s.817.155, F.S.  Maha Houran	yped or printed name of signee Filing Fees