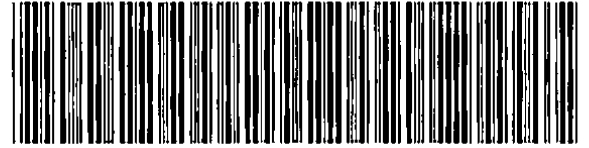


N19000008282



500331080315

03/20/19--01011--002 **25.00

03/06/19--01011--002 **25.00

(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

M. MOON

AUG 07 2019

SECRETARY OF STATE
FALLS CHURCH, VA

19 AUG -6 AM 10:00

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 8, 2019

MANAL FAKHOURY
3110 SE 17TH CT
OCALA, FL 34471

SUBJECT: OLLIN WOMEN INTERNATIONAL, LLC
Ref. Number: W19000062519

FILED
19 AUG - 6 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for OLLIN WOMEN INTERNATIONAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Enclosed is the proper form to fill out to convert the LLC into a Non-Profit. Also the cost to convert the LLC into a Non-Profit is \$105 dollars. There is a balance of \$80 dollars to cover the rest of the cost. So please send another check along with this form back to my attention.

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.

Matthew T Moon
Regulatory Specialist II Supervisor

Letter Number: 719A00013706

*Dear Matthew,
Please find enclosed a check
for \$80⁰⁰. Thank you for your help.*

Matthew T Moon
352-266-1268

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Ollin Women International
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. ~~607.1115, F.S.~~ ^{Now} 617 F.S.

Please return all correspondence concerning this matter to:

Manal Fakhoury
Contact Person

Ollin Women International
Firm/Company

PO Box 4428
Address

Ocala, FL 34478
City, State and Zip Code

Manal.LLP@gmail.com
E-mail address: (to be used for future annual report notification)

FILED
19 AUG -6 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Manal Fakhoury at (352) 266-1268
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$105.00 Filing Fees
- \$113.75 Filing Fees and Certificate of Status
- \$113.75 Filing Fees and Certified Copy
- \$122.50 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:
New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

L18-78104

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation
Now

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. ~~607.1115~~ ⁶¹⁷ Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Ollin Women International LLC
Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business 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 country)

on 3-27-2018
Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Ollin Women International Inc
Enter Name of Florida Profit Corporation
Now

5. If not effective on the date of filing, enter the effective date: _____
(The effective date: Cannot be prior to nor more than 90 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.

FILED
19 AUG -6 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this _____ day of _____, 20_____.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an

Incorporator: manal Fakhoury

Printed Name: manal Fakhoury Title: President

manal Fakhoury

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Laila Fakhoury

Printed Name: Laila Fakhoury Title: Secretary

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of **ALL** General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

SECRETARY OF STATE
FALL APPOINTMENT
19 AUG - 6 AM 10: 01
FILED

ARTICLES OF INCORPORATION
In compliance with Chapt.: 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Oil in Women International Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

3110 SE 17th Court
Coconut Creek, FL 34471

Mailing address, if different is:

PO Box 4422
Coconut Creek, FL 34472

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A women's peace literacy group

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Elected appointment every two years

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Manal Fakhoury Name and Title: _____
president

Address: _____ Address: _____
3110 SE 17th Court
Coconut Creek, FL 34471

Name and Title: Laila Fakhoury Name and Title: _____
Secretary

Address: _____ Address: _____
3110 SE 17th Court
Coconut Creek, FL 34471

Name and Title: Jessi Miller Name and Title: _____
Vice-President

Address: _____ Address: _____
2901 SW 41st Street #2103
Coconut Creek, FL 34474

19 AUG - 6 AM 10: 01
FILED
SECRETARY
TALLAHASSEE

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

 Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Laila Fakhoury
 Address: 3110 SE 17th Ct.
Ocala, FL 34471

FILED
 19 AUG - 6 AM 10:01
 SECRETARY
 TALLAHASSEE

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Manal Fakhoury
 Address: 3110 SE 17th Ct.
Ocala, FL 34471

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Laila Fakhoury 7-31-19
 Required Signature of Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Manal Fakhoury 7/31/19
 Required Signature of Incorporator Date