

N24000004638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

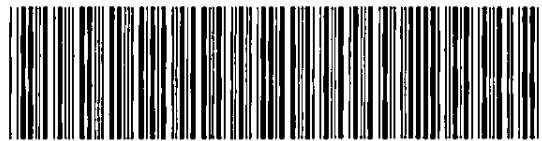
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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03/26/24--01003--003 \*\*122.50

FILED  
2024 MAR 26 AM 8:48  
CLERK OF STATE  
TALLAHASSEE, FL

T. MATTHEWS  
APR 16 2024

15



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 10, 2024

MANAL FAKHOURY  
3110 SW 17TH CT  
OCALA, FL 34471 US

SUBJECT: THE TABLE  
Ref. Number: W24000057326

We have received your document for THE TABLE and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L22000175308.

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.

Tekayla T Matthews  
Regulatory Specialist II

Letter Number: 124A00007757

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT: The Table**

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Non Profit Corporation" in accordance with Chapter 617, Florida Statutes (F.S.) .

Please return all correspondence concerning this matter to:

Contact Person **Manal Fakhoury**

Firm/Company **The Table**

Address **3110 SE 17th Court**

City, State and Zip Code **Ocala, Florida 34471**

E-mail address: (to be used for future annual report notification) **manal.llc@gmail.com**

For further information concerning this matter, please call: **(352) 266-1268**

Enclosed is a check for the following amount:

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

**Mailing Address: Street Address:**

**3110 SE 17th Court**  
**Ocala, FL 34471**

FILED

Certificate of Conversion  
For

2024 MAR 26 AM 8:48

"Other Business Entity"  
Into

SECRETARY OF STATE  
TALLAHASSEE, FL

Florida Profit Corporation  
Non-Profit

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. 607.115, Florida Statutes.  
Non-Profit

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

The Table - National 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 1-3-2023  
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:

The Table - National Inc.  
Enter Name of Florida Profit Corporation  
Non-Profit

5. If not effective on the date of filing, enter the effective date: 4-16-24  
(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.

Signed this 16<sup>th</sup> day of April, 2024

Not Profit  
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 Fakhuony

Printed Name: Manal Fakhuony Title: Chair

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

Signature: Manal Fakhuony

Printed Name: Manal Fakhuony Title: Chair

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) |

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

**FILED**

2024 MAR 26 AM 8:48

**ARTICLE I NAME**

The name of the corporation shall be: The Table - National Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

3110 SE 17th Court

Ocala, FL 34471

MAILING ADDRESS, IF DIFFERENT IS:  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The purpose of The Table - National Inc is organized to serve as a social welfare organization dedicated to building muslim political apcerty in the united states. Through strategic coordination with donors, elected, and candidates, The Table - National Inc aims to enhance the engagement and empowerment of the muslim community. Better serving the community by leveraging organizational structure for maximum effectiveness.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:

Initial and future officers will vote to elect the director.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Manal Fakhouy Name and Title: \_\_\_\_\_

Address: Initial officer Address: \_\_\_\_\_

3110 SE 17th Ct

Ocala, FL 34471

Name and Title: Emad Sablah, initial officer Name and Title: \_\_\_\_\_

Address: 3110 SE 17th Ct Address: \_\_\_\_\_

Ocala,  
8645 Sentinae Chase Drive  
Roswell, GA 30076

Name and Title: Mohammad Matas Name and Title: \_\_\_\_\_

Address: 3121 Michelson Drive Address: \_\_\_\_\_

Suite 510  
Irvine, CA 92612

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: Manal Fakhoury

Address: 3110 SE 17th Court  
Ocala, FL 34471

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Manal Fakhoury

Address: 3110 SE 17th Court  
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*

Manal Fakhoury

Required Signature of Registered Agent

4-18-24

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

Required Signature of Incorporator

4-18-24

Date