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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	<u> </u>
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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NOV - 6 2015 T CANNON

COVER LETTER

TO: Registration Section

Division of Corporations

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Deboca Gillo
(Contact Person)
Debna Gillo LC
(Firm/Company)
1069 Royal Palm DC
(Address)
Barefoot Bay Fl. 32976
(City, State and Zip Code)
grillodebora @ gmail.com
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Delama	Gcilla	_at (594-0279	١_
(Name of Cor	itact Person)	(Area Code)	(Daytime Telephone Number)	

Enclosed is a check for the following amount:

☐ \$150.00 Filing Fees
(\$25 for Conversion & \$125 for Articles & Status

☐ \$150.00 Filing Fees and Certificate of and Certified Copy

\$185.00 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

of Organization)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

INHS11 (06/15)

ATTENTION: TIWA CANNON

FILED SECRETARY OF STATE

Articles of Conversion

For

<u>"Other Business Entity"</u>

Into

Florida Limited Liability Company

TALLAHASSEF, FLORIDA

15 OCT | 3 PM 2: | 5

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with 5,605.1045, Florida Statutes. 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: C(I)(Enter 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 incorporated under the laws of

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.) 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.

The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

Signed this day of	20 \ 5	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative:	ma Milla	
Signature of Authorized Representative:	Title Table 1	
Printed Name: DELOO(a Scillo	_ 1 tile:	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)	
Signature: Delos a Lillo		
Printed Name: 1) 1000 G GCULO	Title: SWYSC	
Signature:		
Signature: Printed Name:	Title:	
Signature: Printed Name:		
Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
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Printed Name:	_ Title:	-
Signature:	<u>ភ</u>	
Printed Name:	Title:	
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If Florida Corporation:	2:	
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 Liabilit	ty Partnership:	
Signature of one General Partner.		
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:	\$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 - Namo:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Barefoot Boy Barefoot Box 33976 Florida 33	idy P

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 business entity with an active Florida registration.)

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

Name

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)

Page 1 of 2

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	Debora Gillo 1069 Royal Palm D. BARFOOT BAY, Fl. 3296			
	→ >> co			
***************************************	SOCT TANK			
(Use attachment if necessary)	SEF SI			
ARTICLE V: Effective date, if other than the date of filing:				
ARTICLE VI: Other provisions, if any.				
This document is executed in acc	or an authorized representative of a member. ordance with section 605.0203 (1) (b), Florida Statutes.			
I am aware that any false informat constitutes a third degree felony a	ion submitted in a document to the Department of State s provided for in s.817.155, F.S.			

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Page 2 of 2