# L17000157993

(Requestor's Name)	
(Address)	
,	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	
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Office Use Only



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### **COVER LETTER**

TO: New Filing S Division of O			
	i Image Consulting LLC		
SOBJECT.	(Name of Re	sulting Florida Limited C	Company)
The enclosed Article Business Entity" int	es of Conversion, Artic o a "Florida Limited L	eles of Organization. iability Company" ir	and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all cor-	respondence concernin	g this matter to:	
Shamir Jourdan Soaris			
	(Contact Person)	· <u>-</u>	
Miami Image Consultin	ñ		
	(Firm/Company)		
8233 Harding Ave. Apt	304		
	(Address)		
Miami Beach, Florida	33141		
	City, State and Zip Code)	<del></del>	
Jourdangroup@sheglob	al.net and smith2064@sbct	global.net	
E-mail Address: (to	be used for future annual re	port notifications)	
For further informat	ion concerning this ma	tter, please call:	
Shamir Jourdan Soaris		_at ( <u>832</u> ) <u>718</u>	8-4489
(Name of Cont	act Person)		Daytime Telephone Number)
Enclosed is a check dollars and drawn or	for the following amount a bank located in the	int: (All checks proce United States)	essed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRES	SS:	MAILING	ADDRESS:
New Filing Section		New Filing	
Division of Corporat	tions	Division of	Corporations
Clifton Building		P. O. Box 6	
2661 Executive Cent	ter	Tallahasser	FI 32314

32301

Circle Tallahassee, FL



April 19, 2017

SHAMIR JORDAN SOARIS 8322 HARDING AVE APT 304 MIAMI BEACH, FL 33141

SUBJECT: MIAMI IMAGE CONSULTING LLC

Ref. Number: W17000033560

We have received your document for MIAMI IMAGE CONSULTING LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Letter Number: 617A00007585

Tim Burch Regulatory Specialist III

www.sunbiz.org

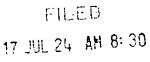
## **Articles of Conversion**

For

## "Other Business Entity"

Into

### Florida Limited Liability Company



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 s.605.1045. Florida

Statutes.

<ol> <li>The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Miami Image Consulting Inc.</li> </ol>
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a S Corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
Sept 21, 2015 (Enter state, or if a non-U.S. entity, the name of the country) $D_{m,i} + D_{i,j} = 2027 \times 322$
(date of organization, formation or incorporation)  DOUT P1500003332
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Miami Image Consulting LLC
(Enter Name of Florida Limited Liability Company)
1. 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 calendar 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.
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 amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 10th day of April	20 <u>17</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Samuel Printed Name: Shamir Jourdan Soaris	J. Soul'S Title: Owner/President
Signature(s) on behalf of Other Business Entity:	
Signature: Thamei J. Jour's	
Signature: Shami J. Sour's Printed Name: Shamir J. Sour's	Title: BUNES / President
Signature: Printed Name:	mid
Trinica Name	rue:
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature	
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Control of Chairman, Vice Chairman, Director, or Control of Chairman, Director, or Chairma	0.00
If Directors or Officers have not been selected, an Inc	
The isolated and the law occursored. All the	corporator must sign.
If Florida General Partnership or Limited Liabilit	y Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
·	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Miami Image Consulting LLC	1.11.11.11.11.11.11.11.11.11.11.11.11.1
(Must contain the words "Lii	nited Liability Company, "L.L.C" or "LLC.")
ARTICLE II - Address:	
The mailing address and street addres	ss of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
200	8233 Harding Ave. Apt 304
8233 Harding Ave. Apt 304	
Miami Beach, Fl 33141	Miami Beach, Fl 33141

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

Linda K. Smith	
Na	me
8233 Harding Ave Apt 304	
Florida street address (P	O. Box NOT acceptable)
Miami Beach	FL 33141
City	Zip

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. Thereby 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)

## ARTICLE IV-

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

	Shamir Jourdan Soaris
	Manager
·	Linon K. Smith  AMBR  322 S235 Harding Ave APT 304  MiAmi Beach, F1 33141
\$75	200 GLSS Hardon Ave APT 304
8.3	MiAMI Beach, FI 33/41
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Use attachment if necessary)	A DECEMBER OF THE PROPERTY OF
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LE V: Effective date, if other than the fective date is listed, the date mus or 90 calendar days after the date	he date of filing:05/01/2017 (OPTION st be specific and cannot be more than five business of filing.)
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LE V: Effective date, if other than the fective date is listed, the date must or 90 calendar days after the date he date inserted in this block does not meet is effective date on the Department of State LE VI: Other provisions, if any.  REOUIRED SIGNATURE:	he date of filing 05/01/2017 (OPTION to be specific and cannot be more than five business of filing.) the applicable statutory filing requirements, this date will not be

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

Typed or printed name of signeey
Filing Fees