Laa00024716a

(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(200,000 200,000,000,000,000,000,000,000,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100385498111

11 19 20 - 1.11 1. 1. 6-191.1

S. CHATHAM JUN -7 2022



COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: The Sunday Dress LLC			
	esulting Florida Lin	nited Company)	
The enclosed Articles of Conversion, Arti- Business Entity" into a "Florida Limited L	-		
Please return all correspondence concerning	ng this matter to	:	
Keren de Zwart			
(Contact Person)			
The Law Office of Keren de Zwart			
(Firm/Company)			
2372 Morse Avenue, Suite 615			
(Address)		_	
Irvine, CA 92614			
(City, State and Zip Code)			
keren@nyfl.law			
E-mail Address: (to be used for future annual r	eport notifications)		
For further information concerning this ma	atter, please call	:	
Keren de Zwart	at (⁹⁴⁹	534-6268	
(Name of Contact Person)		le) (Daytime Telephone Number)	
Enclosed is a check for the following amo dollars and drawn on a bank located in the	•	processed by this office must be	payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\begin{align*} \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co		
Mailing Address: New Filing Section Division of Corporations		Street Address: New Filing Section Division of Corporations	22 MAY -9
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	

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.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: e Sunday Dress LLC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fir	est organized, formed or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
on	March 24, 2021
OII	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Th	e Sunday Dress LLC
_	(Enter Name of Florida Limited Liability Company)
	If not effective on the date of filing, enter the effective date:
•	he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
No	e date this document is filed by the Florida Department of State.) te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nument's effective date on the Department of State's records.
5.	The plan of conversion has been approved in accordance with all applicable statutes.
	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 26th day of April	20 <mark>_22</mark>
Signature of Authorized Representative of Lim	ited Lability Company:
Signature of Authorized Representative:	
Printed Name: Jenniffer Jurotich	Title:\Manager/Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: Jenniffer Jurotich	Title: Manager/Member
•	
Signature:Printed Name:	Title
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title
Three traine.	
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	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership.
Signature of one General Partner.	ty ratthership.
ten at the ten and the ten at the	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ty Limited Partnership:
organismos of <u>respe</u> General Farmers.	
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)

22 MAY -9 MH 3: 25

VY

ARTICLE I - Nam	e:	
The name of the Lin	nited Liability Company	is:
The Sunday Dress LL	С	
<u></u>		bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Add	lress:	
		e principal office of the Limited Liability Company is:
Principal Office Ad	ldress:	Mailing Address:
7004 411 01 11 0 11	200	7004 Ath Ch N. Cuite 200
7901 4th St. N, Suite:	300	7901 4th St. N, Suite 300
7901 4th St. N, Suite St. Petersburg, FL 33 ARTICLE III - Re	702	7901 4th St. N, Suite 300 St. Petersburg, FL 33702 red Office, & Registered Agent's Signature:
St. Petersburg, FL 33 ARTICLE III - Reg (The Limited Liability Conbusiness entity with an ac	702 gistered Agent, Registe	St. Petersburg, FL 33702 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
St. Petersburg, FL 33 ARTICLE III - Rep (The Limited Liability Conbusiness entity with an action of the property of the prope	gistered Agent, Registent apany cannot serve as its own Relive Florida registration.)	St. Petersburg, FL 33702 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
St. Petersburg, FL 33 ARTICLE III - Rep (The Limited Liability Conbusiness entity with an action of the property of the prope	gistered Agent, Register apany cannot serve as its own Retive Florida registration.) orida street address of the Registered Agents Inc.	St. Petersburg, FL 33702 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
St. Petersburg, FL 33 ARTICLE III - Report of the Limited Liability Conbusiness entity with an action of the Planck of the Plan	gistered Agent, Register apany cannot serve as its own Retive Florida registration.) orida street address of the Registered Agents Inc.	St. Petersburg, FL 33702 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
St. Petersburg, FL 33 ARTICLE III - Report of the Limited Liability Conbusiness entity with an action of the Planck of the Plan	gistered Agent, Register apany cannot serve as its own Retive Florida registration.) orida street address of the Registered Agents Inc. No. 7901 4th St. N. Suite 300	St. Petersburg, FL 33702 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
St. Petersburg, FL 33 ARTICLE III - Report of the Limited Liability Consuminess entity with an action of the Florida and the	gistered Agent, Register apany cannot serve as its own Retive Florida registration.) orida street address of the Registered Agents Inc. No. 7901 4th St. N. Suite 300	St. Petersburg, FL 33702 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
St. Petersburg, FL 33 ARTICLE III - Report of the Limited Liability Consuminess entity with an action of the Florida and the	gistered Agent, Register apany cannot serve as its own Retive Florida registration.) orida street address of the Registered Agents Inc. No. 7901 4th St. N. Suite 300 Florida street address (1)	St. Petersburg, FL 33702 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are: ame 2.0. Box NOT acceptable)

imited 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)

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Jenniffer Jurotich
MGK	7901 4th St. N, Suite 300
	St. Petersburg, FL 33702
	
·· ····	
	 -

(Use attachment if necessary)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awar ment to the Department of State constitutes a third degree

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)

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

ARTICLE IV-

Company:

22 HAY -9 RH 3: 25