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(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:
<u> </u>

Office Use Only

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,T. SCOTT

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DIVISION OF CORPORATIONS
TALLARIONSEELFLORIDA

2022 DEC 20 AM 12: 10

Dear Flordia Department of State Division of Corporations,

Please accept this revision submission, my original submission was rejected because i missed a signature, my apologies. The rejection filing is W22000111214. The lady i spoke with said you can use the check I've already mailed in once you receive this correction submission. I never received the rejection because my address was accidentally submitted wrong in the computer system.

Thank you for allowing me to correct this, if there are any other errors i can be contacted directly my phone or email.

Kindly,

Karie Brown Shaelin LLC 502-593-8753 shaelinllc@gmail.com

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Shapling Limited Company) (Name of Resulting Florida Limited Company)	
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert a Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.	an "Othe
Please return all correspondence concerning this matter to.	
Karie Brown	
Shaelin LLC	
309 Woodand Ave	
Mary Esther, FL 32569 (City, State and Zip Code)	
Shaelinica anal.com E-mail Address: (to be used for forture annual report notifications)	
For further information concerning this matter, please call:	
Karie Brown at (502) 593-8753 (Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount: (All checks processed by this office must be payab dollars and drawn on a bank located in the United States)	le in US
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Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(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
on 8 25 200 (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: 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.)
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.

2022 DEC 20 AH IZ: IZ

DIVISION OF CORPORATIONS

	,
Signed this S day of August	_ 20
Signature of Authorized Representative of Limit	ted Linbility Company:
Varia	Bana
Signature of Authorized Representative:	20000
Signature of Authorized Representative: Kaire Brown	_ Title:
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Tarre / St	
Signature: Karie Brand Printed Name: Karie Brand	Title: <u>CEO</u>
•	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	m'.l.
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title
21111001111110.	
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> 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)
Comment of Grands	SS. SS (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	e:	me	a	N:	-	1	Æ		IC	1	ĸ	Α
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The name of the Limited Liability Company is:

(Must contain the words "Lunited Liability Company, "L.L.C.," or "ELC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
309 woodland fre	309 woodland Ave
nary Estar, P 32669	Mary ESTAR, A 3260°
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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

309 Woodland Ave

Florida street address (P.O. Box NOT acceptable)

May Esthor FL 38569

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, 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)



Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
CEO	Karle Brown 309 woodland Ave Mary Esther, Fe 32569
(Use attachment if necessary) CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature of a member or a	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware nent to the Department of State constitutes a third degree fellows.
Signature of a member or a This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree felloped or printed name of signee Filing Fees

ARTICLE IV-

Scott, Tyrone K.

From: Karie Brown <kllbrown84@gmail.com>

Sent: Wednesday, December 28, 2022 10:19 AM

To:Scott, Tyrone K.Subject:Shaelin LLC EIN

EMAIL RECEIVED FROM EXTERNAL SOURCE

Hi Mr Scott,

I would like to keep my same EIN number that I had established with the business originally in Indiana, The business is Shaelin LLC The ein: 85-2695416

Kindly, Karie Brown

Sent from my iPhone