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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
	<b>-</b>	
Special Instructions to	Filing Officer:	
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Office Use Only

EFFECTIVE DATE 04/01/11



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03/30/11--01032--015 \*\*1061.25

D. BRUCE
MAR 3 1 2011
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Complete Skin Care, I	LLP
	rtnership or Limited Liability Limited Partnership
The enclosed Certificate of Conversion, Certi submitted to convert an "Other Organization" Limited Liability Limited Partnership in according	into a Florida Limited Partnership or
Please return all correspondence concerning the	his matter to:
Susan Smith	
Contact Person	
Stratton Law Firm	
Firm/Company	
611 W. Azeele Street	₩ C:
Address	
Tampa, Florida 33606-2205	1 MAR 30 LCRETARY LLAHASSEI
City, State and Zip Code	30 PR
csc@completeskincare.net	<u> </u>
E-mail address: (to be used for future annual report	rt notification)
For further information concerning this matter	حجم مسلم النقير
	at ( <u>813</u> ) <u>251-1624</u>
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
\$1,052.50 Filing Fees (\$52.50 for Conversion and \$1,000 - Certificate)  \$\square \frac{1}{2} \\$1,061.25 Filing Fees and Certificate of Status	□ \$1,105.00 Filing Fees nd Certified Copy □ \$1,113.75 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Registration Section	
Division of Corporations	Division of Corporations
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314	
Tallahassee, FL 32301	1 ananassee, 1 L 32314

### **Certificate of Conversion**

For

### "Other Business Organization"

Into

### Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

Certificate of Conversion is:
Complete Skin Care, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company 10000 4483 (Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws ofFlorida
(Enter state, or if a non-U.S. entity, the name of the country)
on 5-2-2008
(Enter date "Other Business Entity" was first organized, formed or incorporated)
3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:
(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)
4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.
5. If not effective on the date of filing, enter the effective date: 4-1-2011 (The effective date: 1) cannot be prior to 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 Certificate of Limited Partnership, if an effective date is listed therein.)
6. The conversion is permitted by the applicable law(s) governing the other business

entity and the other business entity complies with such law(s) in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction

under which it is currently organized, formed or incorporated.

EFFECTIVE DATE 1/4/1

Signed this / day of / Y / O/C/	. 2011
Signature of Each General Partner Listed in Attacl Partnership/Limited Liability Limited Partnership that the facts stated in this document are true. Any fals degree felony as provided for in s.817.155, F.S.	Individual(s) signing affirm(s)
Signature:	
Printed Name: Robin Milata T	itle: General Partner
Signature:	
	itle: <u>Partners</u>
Signature:	
Printed Name: T	itle:
Signature:	
Printed Name: T	
Signature: T	itle:
Signature: T	itle:
Required Signature(s) on behalf of Other Business Enthat the facts stated in this document are true. Any fals	
degree felony as provided for in s.817.155, F.S. [See be Signature:	elow for required signature(s).]
degree felony as provided for in s.817.155, F.S. [See be Signature:	
degree felony as provided for in s.817.155, F.S. [See be Signature:	elow for required signature(s).] itle: General Partners cer.
degree felony as provided for in s.817.155, F.S. [See be Signature: Printed Name: Robin Milata T  If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Offi	cer. corator must sign.
degree felony as provided for in s.817.155, F.S. [See be Signature: Printed Name: Robin Milata T  If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Offi If Directors or Officers have not been selected, an Incorp	cer. cer. cer. cer. cartnership:
degree felony as provided for in s.817.155, F.S. [See be Signature: Printed Name: Robin Milata T  If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Offi If Directors or Officers have not been selected, an Incorp If Florida General Partnership or Limited Liability P	cer. corator must sign.  artnership:
degree felony as provided for in s.817.155, F.S. [See be Signature: Printed Name: Robin Milata T  If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Incorporation of General Partnership or Limited Liability P Signature of one General Partner.  If Florida Limited Liability Company:	cer. corator must sign.  artnership:
degree felony as provided for in s.817.155, F.S. [See be Signature: Printed Name: Robin Milata T If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Offi If Directors or Officers have not been selected, an Incorp If Florida General Partnership or Limited Liability P Signature of one General Partner.  If Florida Limited Liability Company: Signature of a Member or Authorized Representative.  All others: Signature of an authorized person.  Fees:	cer. corator must sign.  artnership:
degree felony as provided for in s.817.155, F.S. [See be Signature: Printed Name: Robin Milata T  If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Offi If Directors or Officers have not been selected, an Incorp If Florida General Partnership or Limited Liability P Signature of one General Partner.  If Florida Limited Liability Company: Signature of a Member or Authorized Representative.  All others: Signature of an authorized person.  Fees: Certificate of Conversion:	cer. orator must sign.  artnership:  Sec. F. STAN  \$ 52.50
degree felony as provided for in s.817.155, F.S. [See be Signature: Printed Name: Robin Milata T  If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Offi If Directors or Officers have not been selected, an Incorp If Florida General Partnership or Limited Liability P Signature of one General Partner.  If Florida Limited Liability Company: Signature of a Member or Authorized Representative.  All others: Signature of an authorized person.  Fees:  Certificate of Conversion: Fees for Florida Certificate of Limited Partnershi	cer. orator must sign.  artnership:  Sec. F. STAN  \$ 52.50
degree felony as provided for in s.817.155, F.S. [See be Signature: Printed Name: Robin Milata T  If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Offi If Directors or Officers have not been selected, an Incorp If Florida General Partnership or Limited Liability P Signature of one General Partner.  If Florida Limited Liability Company: Signature of a Member or Authorized Representative.  All others: Signature of an authorized person.  Fees: Certificate of Conversion:	cer. orator must sign.  artnership:  Sec. F. STAN  \$ 52.50

## CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

1	Complete Skin Care, LLLP
Acceptable Li	f Limited Partnership or Limited Liability Limited Partnership, which must include suffix) imited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. imited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
<b>2</b> . 121	125 Stone Lake Ranch Blvd., Thonotosassa, FL 33592
	Street address of initial designated office
3.	Stratton Law Firm
,	Name of Registered Agent for Service of Process
<b>4</b> . 61	ll W. Azeele Street
	Florida street address for Registered Agent
Ta	ampa, Florida 33606-2205
comply with t	sccept the appointment as registered agent and agree to act in this capacity. I further agree to the provisions of all statutes relative to the proper and complete performance of my duties, iliar with an accept the obligations of my position as registered agent.  Signature of Registered Agent
6. <sup>1</sup>	2125 Stone Lake Ranch Blvd.
	Mailing address of initial designated office
Th	onotosassa, FL 33592
7. If limite	d partnership elects to be a limited liability limited partnership, check box .

Page 1 of 2



8. Name and business address of ex Name:	ach general partner: <u>Business Address:</u>
Robin Milata	12125 Stone Lake Ranch Blvd.
	Thonotosassa, FL 33592
•	
9. Effective date, if other than the date of i	filing: 4-1-2011
(Effective date cannot be prior to no filed by the Florida Department of S	or more than 90 days after the date the document is State.)
Signed this 10th day o	of March, 2011.
stated herein are true. I/We am/are a	We submit this document and affirm that the facts aware that any false information submitted in a se constitutes a third degree felony as provided for in
MC .	
	IR 30
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$\frac{1}{25} \\ \frac{1}{25} \\ \fra