

LD70000109492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

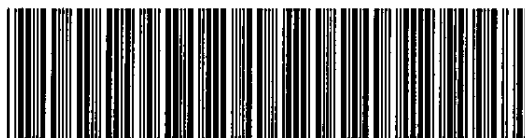
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TALLAHASSEE, FLORIDA

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**J. ROBERT DUGGAN, P.A.**  
Attorney and Counselor at Law

J. ROBERT DUGGAN

207 West North Boulevard  
LEESBURG, FLORIDA 34748  
TELEPHONE: (352) 314-9255  
FAX: (352) 314-0466

May 14, 2007

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: **Beauty Unlimited at Cutter's Point, LLC**

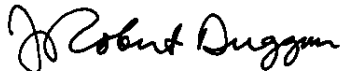
Dear Sir or Madam:

Please find enclosed the following documents pertaining to the above referenced:

1. Certificate of Conversion
2. Articles of Organization
3. Check in the amount of \$150.00 to cover the filing fee

Thank you for your attention to this matter.

Very truly yours,



J. Robert Duggan  
Attorney at Law

JRD/kl

Enclosures



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 22, 2007

J. ROBERT DUGGAN, P.A.  
207 WEST NORTH BLVD.  
LEESBURG, FL 34748

SUBJECT: BEAUTY UNLIMITED AT CUTTER'S POINT, LLC  
Ref. Number: W07000024572

We have received your document for BEAUTY UNLIMITED AT CUTTER'S POINT, 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):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

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) 245-6967.

Leslie Sellers  
Document Specialist

Letter Number: 907A00035647

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF CONVERSION**  
**FOR**  
**“OTHER BUSINESS ENTITY”**  
**INTO**  
**FLORIDA LIMITED LIABILITY COMPANY**

This Certificate 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 Section 608.439, Florida Statutes.

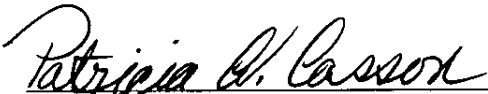
1. The name of the “Other Business Entity” immediately prior to the filing of this Certificate of Conversion is: **BEAUTY UNLIMITED, INC.**

2. The “Other Business Entity” is a Florida Corporation first organized, formed or incorporated under the laws of Florida on July 6, 1987.

3. The name of the Florida Limited Liability Company as set forth in the attached **Articles of Organization** is: **BEAUTY UNLIMITED AT CUTTER’S POINT, LLC**

4. The effective date of the Florida Limited Liability Company is the 1st day of July, 2007.

Signed this 14th day of June, 2007.

  
**PATRICIA W. CASSON**  
PRESIDENT

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – NAME:**

The name of the Limited Liability Company is: **BEAUTY UNLIMITED AT CUTTER'S POINT, LLC**

**ARTICLE II – Address:**

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

**Principal Office Address:**

340 West Oak Terrace Drive, Suite 122  
Leesburg, Florida 34748

**Mailing Address:**

340 West Oak Terrace Drive, Suite 122  
Leesburg, Florida 34748

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's  
Signature:**

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

**PATRICIA W. CASSON**  
1021 Cottonwood Street  
Leesburg, Florida 34748

*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 608, F.S.*

  
**PATRICIA W. CASSON**

**ARTICLE IV – Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows

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TALLAHASSEE, FLORIDA

**FILED**

**Title:**

MGRM

**Name and Address:**

PATRICIA W. CASSON  
1021 Cottonwood Street  
Leesburg, Florida 34748

**ARTICLE V – Effective date:**

The effective date of this Limited Liability Company shall be the 1st day of  
July, 2007.

  
\_\_\_\_\_  
PATRICIA W. CASSON

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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