

LO7000119135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

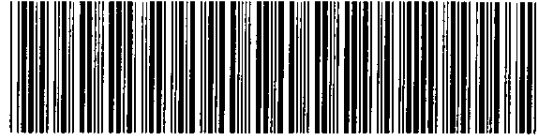
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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TALLAHASSEE FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sassy Sue's Boutique of Beauty
(Name of Resulting Florida Limited Company)

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

Susan G. Jacobs
(Contact Person)

(Firm/Company)

678 Osprey Lakes Cir
(Address)

Chuluota, FL 32766
(City, State and Zip Code)

For further information concerning this matter, please call:

Susan Jacobs at (407) 230-2635
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$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 ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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 s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

_____ Sassy Sue's Boutique _____
(Enter Name of Other Business Entity)

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2. The "Other Business Entity" is a sole proprietorship.
(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on 05-09-2006.
(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

_____ MA _____

4. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

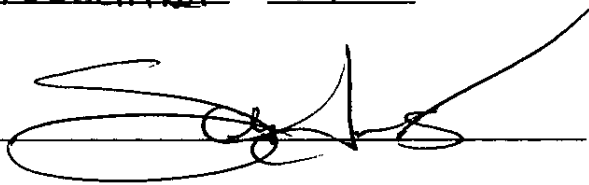
_____ Sassy Sue's Boutique of Beauty LLC _____
(Enter Name of Florida Limited Liability Company)

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5. If not effective on the date of filing, enter the effective date: January 1, 2008
(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 Articles of Organization, if an effective date is listed therein.)

Signed this 26 day of November 2007.

Signature of Authorized Person:



Printed Name: Susan Co. Jacobs Title: Owner

Fees:

Certificate of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

**Articles of Organization
For
Florida Limited Liability Company**

Article I

The name of the Limited Liability Company is Sassy Sue's Boutique of Beauty LLC

Article II

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

678 Osprey Lakes Circle
Chuluota, Florida 32766

The mailing address of the Limited Liability Company is:

678 Osprey Lakes Circle
Chuluota, Florida 32766


Article III

The name and address of the registered agent is:

Susan G. Jacobs
678 Osprey Lakes Circle
Chuluota, Florida 32766

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TALLAHASSEE FLORIDA

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..



Susan G. Jacobs, Registered Agent

Article IV

The name and address of managing member/manager is:

Title: MGRM
Susan G. Jacobs
678 Osprey Lakes Circle
Chuluota, Florida 32766

Article V

The effective date of the Limited Liability Company is January 1, 2008.



Susan G. Jacobs