

L09000009500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

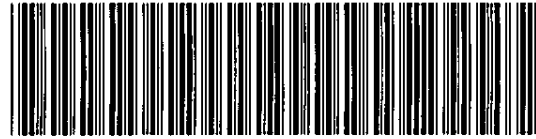
(Document Number)

Certified Copies _____ Certificates of Status _____

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02/03/09--01001--006 **25.00

01/26/09--01022--017 **125.00

RECEIVED
09 JAN 26 PM 12:55
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
09 JAN 26 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

FEB - 3 2009

EXAMINER

FLORIDA RESEARCH & FILING SERVICES, INC.
1211 CIRCLE DRIVE
TALLAHASSEE, FL 32301
PHONE (850)656-6446

OFFICE USE ONLY

WALK-IN

ENTITY NAME:

CULTURALLY CHIC, LLC

CK# 3748

AMOUNT \$125.00 & CK# 3753 \$25.⁰⁰

PLEASE FILE THE ATTACHED CONVERSION & RETURN THE FOLLOWING:

___ CERTIFIED COPY

XXX STAMPED COPY

___ CERTIFICATE OF STATUS

* RESUBMITTING w/ CORRECTIONS
PLEASE RETAIN ORIGINAL
SUBMISSION DATE 1-26-09

Examiner's Initials

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

09 JAN 29 PM 12:19

RECEIVED

FILED
09 JAN 26 PM 3:05

TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 26, 2009

FLORIDA RESEARCH & FILING SERVICE

TALLAHASSEE, FL

SUBJECT: CULTURALLY CHIC, LLC
Ref. Number: W09000003877

FILED
09 JAN 26 PM 3:05
TALLAHASSEE, FLORIDA

I certify the attached is a true and correct copy of the Reincorporation of CULTURALLY CHIC, LLC, a Legislatively or Judicially chartered corporation of the state of Florida, filed on January 26, 2009, as shown by the records of this office.

The document number of this corporation is W09000003877.

Please note that we have RETAINED your \$125.00 payment.

The TOTAL AMOUNT required to file a conversion to a Florida LLC is \$150.00.

PLEASE RETURN your filing with an ADDITIONAL \$25.00.

ALSO, there must be TWO SIGNATURES on the Certificate of Conversion. There must be a signature for the CONVERTING ENTITY, and a separate signature for the RESULTING ENTITY.

ALSO, in addition to the Certificate of Conversion, you must submit a signed and completed ARTICLES OF ORGANIZATION for the Florida LLC.

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) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 209A00002772

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

FILED
09 JAN 26 PM 3:05
TALLAHASSEE, FLORIDA

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:
Culturally Chic, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited liability company
(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 New York
(Enter state, or if a non-U.S. entity, the name of the country)

on APRIL 08, 2005

(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:

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

Culturally Chic, LLC

(Enter Name of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the effective date:
(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 _____ day of _____, 20____.

Signature of Member or Authorized Representative of Limited Liability Company:

Signature of Member or Authorized Representative: Judit Fabian

Printed Name: Judit Fabian

Title: Member

Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Judit Fabian

Printed Name: Judit Fabian

Title: member

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

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 - Name:**

The name of the Limited Liability Company is:

Culturally Chic, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:2627 South Bayshore DriveSuite 1406Miami, FL 33133**Mailing Address:**2627 South Bayshore DriveSuite 1406Miami, FL 33133**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:

Judit Fabian

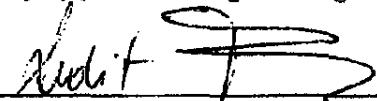
Name

2627 South Bayshore Drive Suite 1406Florida street address (P.O. Box **NOT** acceptable)Miami33133

FL

City, State, and 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 608, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Judit Fabian

2627 South Bayshore Drive

Suite 1406

Miami, FL 33133

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(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.)

Judit Fabian

Typed or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)