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(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	WAIT	MAIL
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(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
0-40-40-4-	O a matter a la Alain	
Certified Copies	_ Certificates	of Status
Cussial lustimations to	Filing Officer	
Special Instructions to	Filing Officer:	
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Office Use Only



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2010 HAR -5 PH - IT IT

C. LEWIS

MAR 8 2010

EXAMINER

COVER LETTER

Division of C			
SUBJECT:	(Name of Resulting	Company Florida Limited Compa	LL C
The enclosed Certific	cate of Conversion, Ar siness Entity" into a "	ticles of Organizatio	on, and fees are submitted to
Please return all corre	espondence concerning	g this matter to:	
Michel	LEGROS		
	(Contact Person)		
My CANDY	Company		
	(Firm/Company)	,	
77.65 SW	142 Ter.		
	(Address)		
Miami, Fl	_ 33158 City, State and Zip Code)		
((City, State and Zip Code)		
michel @my	candy con hany. Let	m	
E-mail Address: (to b	e used for future annual re	port notifications)	
For further information	on concerning this ma	tter, please call:	
Michel	LEGROS	at (305)	8 04 0 24 2 Daytime Telephone Number)
(Name of Conta	ct Person)	(Area Code and	Daytime Telephone Number)
Enclosed is a check f	or the following amou	int:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fee and Certified Copy	S \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILING	G ADDRESS:
Registration Section		Registratio	
Division of Corporati	ions	Division o	f Corporations
Clifton Building		P. O. Box	
2661 Executive Center Tallahassee, FL 3230		Tallahasse	e, FL 32314
rananassee, i ii 323	V 1		•

FILED

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability

Company in accordance with s.608.439, Florida Statutes.

الما جبةِ سما ا

2010 MAR -5 PM 1 1

SECRETARY OF STATE TALLAHASSEE, FLORIDA

	f Conversion is: My CANDY Company Inc.
	(Enter Name of Other Business Entity)
2. The "Oth	er Business Entity" is a S Corp. P930006055 Enter entity type. Example: corporation, limited partnership,
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
irst organize	ed, formed or incorporated under the laws of FLoaidA
Č	(Enter state, or if a non-U.S. entity, the name of the country)
on Ava	26 1993
(Enter da	26 \ 993 te "Other Business Entity" was first organized, formed or incorporated)
	sdiction of the "Other Business Entity" was changed, the state or country vs of which it is now organized, formed or incorporated: \[\lambda \seta \alpha \]
	of the Florida Limited Liability Company as set forth in the attached Organization:
	My CANDY Company LLC.
	(Enter Name of Florida Limited Liability Company)
	ective on the date of filing, enter the effective date:
5 If not effe	

Signed this 3 day of March	20 <u>%</u>		
Signature of Member or Authorized Representative of Limited Liability Company:			
Signature of Member or Authorized Representative Printed Name: Michel LEGROS	Title: MGR		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).]		
Signature:			
Printed Name: Michel LEGROS	Title: Clairman		
Signature			
Signature: Printed Name:			
Ciamatrina			
Signature: Printed Name:	Title:		
Signature: Printed Name:	Title:		
Signature: Printed Name:	Titlo		
rinted Name.	Title.		
Signature: Printed Name:	TOTAL CONTRACTOR OF THE PARTY O		
Printed Name:	I itle:		
If Florida Corporation:			
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc	amanda must sian		
in Directors of Officers have not occur screeted, an inc	y Partnership:		
If Florida General Partnership or Limited Liabilit	y Partnership:		
Signature of one General Partner.	y Partnership: y Limited Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.			
All others: Signature of an authorized person.	STATE STATE A		
Fees:			
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "LLC.")	"Limited Liability Com	apany," the abbreviation "L.L.C.," or the design	ation
ARTICLE II - Add The mailing addres Liability Company	s and street addres	ss of the principal office of the Limi	ted
Principal Office A	ddress:	Mailing Address:	
7255 SW	142 Ter.	Dame	
	raintened Age-4 I	Designation of Pagistaned A	gant's
ARTICLE III - Re Signature: (The Limited Liability Co individual or another business entity with an a	mpany cannot serve as i	Registered Office, & Registered A its own Registered Agent. You must designate a n.) ess of the registered agent are:	an
ARTICLE III - Re Signature: (The Limited Liability Co individual or another business entity with an a	mpany cannot serve as inctive Florida registration Florida street addresserved.	its own Registered Agent. You must designate a n.) ess of the registered agent are:	2010 HAR -5 TALLAHASS
ARTICLE III - Re Signature: (The Limited Liability Co individual or another business entity with an a	mpany cannot serve as inctive Florida registration Florida street address Michel 7255 SW	its own Registered Agent. You must designate and in.) ess of the registered agent are: LEGROS Name 142 Ter.	2010 HAR -5 TALLAHASS
ARTICLE III - Re Signature: (The Limited Liability Co individual or another business entity with an a	mpany cannot serve as inctive Florida registration Florida street address Michel 7255 SW	its own Registered Agent. You must designate a n.) ess of the registered agent are:	an

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
M&R	Michel LEGROS 7255 SW 142 Ter. Miani FL 33.158
·	
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the date	e of filing: (OPTIONAL)
(The effective date: 1) cannot be prior to nor document is filed by the Florida Department of the effective date listed in the attached Cert date is listed therein.)	more than 90 days after the date this of State; <u>AND</u> 2) must be the same as
REQUIRED SIGNATURE:	
	_
Signature of a member or an autho	rized representative of a member.
(In accordance with section 608.408 of this document constitutes an affirm that the facts stated	(3), Florida Statutes, the execution nation under the penalties of perjury
Michel 1	EGROS
Typed or printed	name of signee
Filing Fees:	name of signee TALLAHASSSI
\$125.00 Filing Fee for Articles of O	rganization and Designation
of Registered Agent	Samuelon and Designation MC T
\$ 30.00 Certified Copy (Optional)	Fig.
\$ 5.00 Certificate of Status (Optio	
Page 2 of 2	