

L11000054028

(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:

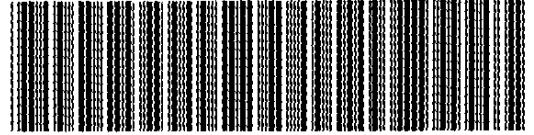
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 MAY - 3 PM 3:41

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Pink Parasol LLC

(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:

Erica Bruhier

(Contact Person)

The Pink Parasol

(Firm/Company)

4371 Northlake Blvd, Suite 207

(Address)

Palm Beach Gardens, FL 33410

(City, State and Zip Code)

info@ThePinkParasol.com

E-mail address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Erica Bruhier

(Name of Contact Person)

at ( 561 )

247-0039

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 29, 2010

ERICA BRUHIER  
4371 NORTHLAKE BLVD., STE. 207  
PALM BEACH GARDENS, FL 33410

SUBJECT: THE PINK PARASOL LLC  
Ref. Number: W10000059783

We have received your document for THE PINK PARASOL 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 Florida Statutes prohibits a Florida non-profit corporation from being a party in a conversion. A Florida non-profit corporation may be a party in a merger; however, the Florida non-profit corporation must be the surviving entity.

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  
Regulatory Specialist II

Letter Number: 710A00030117

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

The Pink Parasol LLC

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

**ARTICLE II - Address:**

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

**Principal Office Address:**

4371 Northlake Blvd

Suite 207

Palm Beach Gardens, FL 33410

**Mailing Address:**

4371 Northlake Blvd

Suite 207

Palm Beach Gardens, FL 33410

**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:

Erica Bruhier

Name

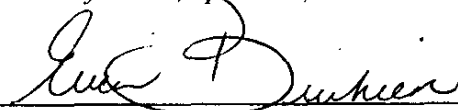
4371 Northlake Blvd, Suite 207

Florida street address (P.O. Box **NOT** acceptable)

Palm Beach Gardens FL 33410

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 MAY -3 PM 3:41

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**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

Erica Bruhier

4371 Northlake Blvd, Suite 207

Palm Beach Gardens, FL 33410

MGRM

Renan Bruhier

4371 Northlake Blvd, Suite 207

Palm Beach Gardens, FL 33410

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

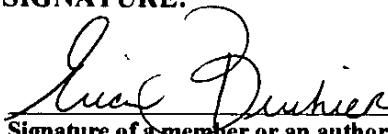
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing \_\_\_\_\_  
(OPTIONAL)

**(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed b the Florida Department of State; AND 2) must be the same as the effective date listed in the attache Certificate of Conversion, if an effective date listed therein.)**

**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 unde the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Erica Bruhier

Typed or printed name of signee