# 412000048292

(Requestor's Name)
(Address)
(Address)
, ,
(City)(Chata Tin)(Dhana 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
• •
APR -9 2011
EVARAIA
EXAMINER

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FILED

2012 APR -6 PH 2 FI

# **COVER LETTER**

TO:	Registratio Division of	n Section f Corporations							
SUBJ	ECT:	Interna	ationa	l Hair Aca	demy, L	LC			
БСВ	2011	(Name o	of Resulti	ng Florida Lin	ited Compa	nny)			
"Othe	r Business E	ificate of Conversion, ntity" into a "Florida I	Limited	Liability Co					
Steve	en D. Duke	r				•	. 1	· ·	
	<del></del>	(Contact Person)		<del></del>				2812 i	
Dubro	ow Duker &	Associates, P.A.						APR	es(>
		(Firm/Company)					ου 13 μα εκλαπα	9-	] ;
5401	N. Universi	ity Drive, Suite 204					ان المارية المارية المارية	<u>ক্ষ</u>	j
		(Address)					771	<b>≱</b> 5	Υ.
Cora	l Springs,	FL 33067						te.	
		(City, State and Zip Code	=)				• •	-	
	harroch@g								
E-mail	address: (to be	used for future annual repo	ort notific	cations)					
For fu	rther inform	ation concerning this r	natter, p	olease call:				•	
Steve	n D. Duker		at (	954	345-03		·		
	(Name of Co	ntact Person)		(Area Code	and Daytim	e Telephone Num	iber)		
Enclos	sed is a check	k for the following am	ount:						
(\$25 for & \$125	Filing Fees r Conversion for Articles mization)	\$155.00 Filing Fees and Certificate of Status		0.00 Filing Fee Certified Copy	/	35.00 Filing Fees, rtified Copy, and rtificate of Status			
	ET ADDRE			Registra	NG ADD	ion			
	on of Corpoi	rations			of Corpo	orations		•	
	n Building Executive Ce	enter Circle		P. O. Bo Tallaha	ox 6327 ssee, FL	32314			
	assee, FL 3			2 4114114	, 111 .				

# 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.

5.000.409, Fixinda Statutes.	a a	•
1. The name of the "Other Business Entity" immediately prior to the filing of this Certific Conversion is:	cate of E	2012 APR
International Hair Academy, Inc.	\$2.45	- 50
(Enter Name of Other Business Entity)	· 表系	9
2. The "Other Business Entity" is a Corporation		
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
first organized, formed or incorporated under the laws of Florida	ક્ષેત્ર કોર્યું જ્લા	1.
(Enter state, or if a non-U.S. entity, the name of the country)	•	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
on August 30, 2010		
(Enter date "Other Business Entity" was first organized, formed or incorpo	rated)	
	,	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country und	er the laws	of
which it is now organized, formed or incorporated:		
		,
n/a ·		
4. The name of the Florida Limited Liability Company as set forth in the attached Articl	es of	
Organization:		
International Hair Academy, LLC		
(Enter Name of Florida Limited Liability Company)		٠.
	•	
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 d filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective datached Articles of Organization, if an effective date is listed therein.)		
6. The conversion is permitted by the applicable law(s) governing the other business entity conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting		rsion.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction u currently organized, formed or incorporated.	nder which	it is

\$5.00 (Optional)

Page 2 of 2

Certificate of Status:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
•
International Hair Academy, LLC

## ARTICLE II - Address:

ADTICLET

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

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

Principal Office	Address:	Mailing Address:			
7025 Beracasa Wa	IY	7025 Beracasa Way			
Suite 206		Suite 206		•	
Boca Raton, FL 33	443	Boca Raton, FL 33443			
(The Limited Liability business entity with a		ed Office, & Registered Agen istered Agent. You must designate an ind registered agent are:		2012 APR -	***************************************
		Name	Cp -	5	
	5401 N. University		I <sup>nter</sup> €.		*
	Florida street addres	ss (P.O. Box <u>NOT</u> acceptable)	25	<b>运</b>	- Sanda
•	Coral Springs	<u> </u>	10.2		
	City	y, 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 abligations of my position as registered agent as providely for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:		
"MGR" = Manager			
"MGRM" = Managing Men	noer		
MGRM	Betty Harroch		
, .	7025 Beracasa Way, Suite	206	
	Boca Raton, FL 33443		_
	•		,
MGRM .	George Egett		<del></del>
•	7025 Beracasa Way, Suite	206	
•	Boca Raton, FL 33443	,	- Œ.
			- c3
•			- <u>12 13</u>
· .			I SE
			(23 - m) (23 - m)
, , , , , , , , , , , , , , , , , , , ,	1.		_ `_`%
•			- 121/4
•			- 37
(Use attachment if necessary	v)		175
, ,	•		
CLE V: Effective date, if or	ther than the date of filing:		
	COPTION .		
effective date: 1) cannot be	prior to nor more than 90 days after t	he date this docu	iment is fil
	; AND 2) must be the same as the effe	ective date listed	in the atta
icate of Conversion, if an e	ffective date listed therein.)		
UIRED SIGNATURE			
. !! !/ !/ /	$\mathcal{M}_{n} + \mathcal{J}_{n}$		
$\sim$ 1\X\L			
8 84		A 20	
Signature of a member	er or an authorized representative of a memb	,	
In accordance with section 608.4	er or an authorized representative of a memb 08(3), Florida Statutes, the execution of this do acts stated herein are true. I am aware that any f	cument constitutes a	n affirmation

Page 2 of 2