L13000055524

(Requestor's Name)
· (Address)
(Address)
(133.233)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
, , , , , , , , , , , , , , , , , , ,
Certified Copies Certificates of Status
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Office Use Only



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APR 1 6 2013 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ORCHID DESIGNS BY PIERRE LLO	2
(Name of Resulting Florida Lin	nited Company)
The enclosed Certificate of Conversion, Articles of Organiz "Other Business Entity" into a "Florida Limited Liability Conversion, Articles of Organiz "Other Business Entity" into a "Florida Limited Liability Conversion, Articles of Organization "Other Business Entity" into a "Florida Limited Liability Conversion" in the Entitle Conversion of Conversion (Conversion) and Conversion (Conversion	
Please return all correspondence concerning this matter to:	
PIERRE DAGENAIS	
(Contact Person)	
ORCHID DESIGNS BY PIERRE	_
(Firm/Company)	
917 NORTH D STREET	
(Address)	
LAKE WORTH FL 33460	-
(City, State and Zip Code)	
E-mail address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
PIERRE DAGENAIS at (561	₎ 585-5912
	and Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$150.00 Filing Fees and Certificate of Status 550 Filing Fees and Certified Cop	
	ING ADDRESS:
	ation Section
	n of Corporations ox 6327
	ssee, FL 32314
Tallahassee, FL 32301	

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.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of	
Conversion is:	
ORCHID DESIGNS BY PIERRE INC P10000 72995	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	DIVISION
(Enter entity type. Example: corporation, limited partnership,	5 <u>5</u> 5
general partnership, common law or business trust, etc.)	
<u>u</u>	n Gž
first organized, formed or incorporated under the laws of FLORIDA	<u>~</u> ∺
(Enter state, or if a non-U.S. entity, the name of the country)	OF CORPORATIONS
	<u>:</u> =
	1
(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 law which it is now organized, formed or incorporated:	S OI
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
ORCHID DESIGNS BY PIERRE 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 if filed by the Florida Department of State; AND 2) must be the same as the effective date listed attached 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 and the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion	ersion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this 13 day of March	₂₀ /3 .
Signature of Member or Authorized Repres	sentative of Limited Liability Company:
Individual signing affirms that the facts state	d in this document are true. Any false information
constitutes a third degree felony as provided	
Signature of Member or Authorized Represent	taive: X Jame Sollier
Printed Name: PIERRE DAGENAIS	Title: MEMBER
Signature(s) on behalf of Other Business Enti	ity: Individual(s) signing affirm(s) that the facts stated in
 this document are true. Any false information 	n constitutes a third degree felony as provided for in
s.817.155, F.S. [See below for required signature]	
Signature Color	Title: pproprie
Printed Name: NERRE DAGENAIS	Title. PRESIDENT
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Directo	r, or Officer.
If Directors or Officers have not been selected, a	an Incorporator must sign.
If Florida General Partnership or Limited Li	ability Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Li	ability Limited Partnership
Signatures of <u>ALL</u> General Partners.	
All others	13 APR
All others: Signature of an authorized person.	PR

\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

Certified Copy: Certificate of Status: Page 2 of 2

Fees:

Certificate of Conversion:

Fees for Florida Articles of Organization:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
ORCHID DESIGNS BY PIERRE LLC (Must end with the words "Limited Liability Company, the abbreviation	n "L.L.C.," or the designation "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
917 NORTH D STREET S LAKE WORTH FL 33460	SAME AS PRINCIPAL ADDRESS
ARTICLE HI - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own Registered Agbusiness entity with an active Florida registration.)	ent. You must designate an individual or another
The name and the Florida street address of the register	red agent are:
PIERRE DAGENAIS	
Nam	ne
917 NORTH D STREET Florida street address (P.O.	Box NOT acceptable)

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, E.S.

City, State, and Zip

LAKE WORTH

egistered Agent's Signature (REQUIRED)

(CÓNTINUED)

Page 1 of 2

SECRETARY OF STAFE
DIVISION OF CORPORATIONS

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managir	ng Member	
MGR	PIERRE DAGENAIS	
1011		
	917 NORTH D STREET	
	LAKE WORTH, FL 33460	
· ·		
		
(7)		
(Use attachment if no	• •	
CICLE V. Decation d	ate, if other than the date of filing:(OPTIONAL)	
IICLE V. Enective da	ate, if other than the date of filing:	,
e effective date: 1) can	nnot be prior to nor more than 90 days after the date the	his document is filed by
Florida Denartment o	of State; AND 2) must be the same as the effective date	te listed in the attached
tificate of Conversion.	, if an effective date listed therein.)	e listed in the attached
	, in an oncome date instead thereinin,	
<u>DUIRED</u> SIGNATUR	RE:	
PVI		
/ May	W of lear	
Signature of a	a member of an authorized representative of a member.	
(In accordance with section	ion 608.408(3), Florida Statutes, the execution of this document con	estitutes en affirmation under
the penalties of perjury t	that the facts stated herein are true. I am aware that any false inform	ation submitted in a
document to the Departn	nent of Stale constitutes a third degree felony as provided for in s.8	17.155, F.S.)
PIERRE I	DAGENAIS	_ 0
	Typed or printed name of signee	— 3 YSE
	- TPWW OF PERMICUNAL PROPERTY OF STREET	-1-20