L14000136794

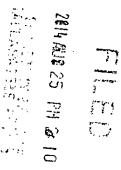
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
(any) contains a part of the my
PICK-UP WAIT MAIL
(Business Entity Name)
V14-14563
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SEP - 2 7014
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1.1.A//~/
W14-50451

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 18, 2014

LILIANE JESUS CSG - CAPITAL SERVICES GROUP INC. 446 W. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441

SUBJECT: HAIR R&S USA LLC Ref. Number: W14000050451

We have received your document for HAIR R&S USA 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):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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) 245-6051.

Agnes Lunt Regulatory Specialist II

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Letter Number: 814A00017726

COVER LETTER

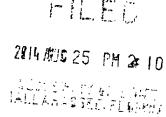
то:	Registration S Division of Co				
SUBJ	ECT: HAIR R	&S USA CORP			
			of Resulting Florida	Limited	I Company)
					d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this matter to:		
LILIA	NE JESUS				
		(Contact Person)			
CSG	- CAPITAL SI	ERVICES GROUP, I	NC.		
		(Firm/Company)			
446 \	N HILLSBOR	O BLVD	_		
		(Address)			
DEE	RFIELD BEAC	CH, FL 33441			
		City, State and Zip Code)			
LILIA	NE@THEWA	YGROUP.BIZ			
E-n	nail Address: (to be	e used for future annual rep	port notifications)		
For fu	rther informatio	on concerning this mat	ter, please call:		
LILIA	NE JESUS		at (954	427-	4770
<u></u>	(Name of Conta	ct Person)	_ \	(Dayt	time Telephone Number)
Enclo	sed is a check for	or the following amou	nt:		
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles mization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STRE	ET ADDRESS	S:	MAILI	NG A	DDRESS:
_	ration Section		Registra		
	on of Corporati	ons			orporations
	n Building Executive Cente	er Circle	P. O. Bo Tallahas		TL 32314
	assee, FL 3230		i arranti.	, 1	

FILE L

Articles of Conversion For "Other Business Entity"

Into

Florida Limited Liability Company



The Articles 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.605.1045, Florida Statutes.

HAIR R&S USA CORP	ntity" immediately prior to the filing of the Articles of Conversion is:
	ame of Other Business Entity)
2. The "Other Business Entity" is a $\frac{CG}{R}$	ORPORATION
(Ent	ter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated	lunder the laws of FLORIDA
02/14/2014	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorpo	oration)
3. The name of the Florida Limited Lia	ability Company as set forth in the attached Articles of Organization:
HAIR R&S USA LLC	
(Enter Name of F	lorida Limited Liability Company)
4. If not effective on the date of filing,	enter the effective date:
(The effective date: 1) cannot be pricedate this document is filed by the Flo	or to date of receipt or filed date nor more than 90 days after the crida Department of State; <u>AND</u> 2) must be the same as the effective Organization, if an effective date is listed therein.)
5. The plan of conversion has been app	roved in accordance with ss. 605 1041-605 1046

Page 1 of 2

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		FILED
Signed this 8TH day of AUGUST	20_14	26/4/AJE 25 PH 2 10
Silver of A. Alter in all Decrease Adding of I had	ted Linkske Commons	25 PH 2 10
Signature of Authorized Representative of Limit		<i>**</i> 10
Signature of Authorized Representative:	nala t. de Silva	THE STATE OF STATE OF
Printed Name: ROSANGELA F. DA SILVA	Title: PRESIDENT	· · · · · · · · · · · · · · · · · · ·
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).	
	the below to required signature(s)/1	
Signature: Korangela F. da Silva	CDEOLDENIT	•
Printed Name: ROSANGELA F. DA SILVA	Title: PRESIDENT	•
Signature:		_
Signature: Printed Name:	Title:	•
Signature		
Signature: Printed Name:	Title:	•
		**
Signature: Printed Name:	Title	-
Timeo Name.	Title,	•
Signature:		
Printed Name:	Title:	-
Signature:		
Printed Name:		- -
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Director, or	Officer.	
If Directors or Officers have not been selected, an Inc	corporator must sign.	
If Florida General Partnership or Limited Liabili	ty Partnership	
Signature of one General Partner.	Tartheramp.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:	
Signatures of ALL General Partners.	<u> </u>	
All others: Signature of an authorized person.	,	
Fees:		
Articles of Conversion:	\$25.00	
Fees for Florida Articles of Organization:	\$25.00 \$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:

2014度2225	Рм	2	
March 1	,	47	10

HAIR R&S USA 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:	<u>Malling Address:</u>
5394 LYONS RD STE B6	SAME
COCONUT CREEK, FL 33073	

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:

CSG - CAPITAL SERVICES GROUP, INC.

Name

446 W HILLSBORO BLVD

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

DEERFIELD BEACH FL 33441
City 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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	,	I*** -
ARTICLE IV- The name and address of each perso Company:		F11 E
ARTICLE IV-		284
The name and address of each person	on authorized to manage and con-	trol the Limited Liabilit
Company:		PH
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	Market State
"MGR" = Manager		· U
AMBR	ROSANGELA F. DA SI	LVA
	5394 LYONS RD STE	
	COCONUT CREEK, FL	33073
AMPD	AV/IDA C. CARTILLO	
AMBR	<u>AVIDA G. CASTILLO</u> 5394 LYONS RD STE I	D6
	COCONUT CREEK, FL	
	OCCORDI ONLLIN, I L	
AMBR	ELAINE M. BLANCO	
<u> </u>	5394 LYONS RD STE	
	COCONUT CREEK, FL	_ 33073
		
(Use attachment if necessary)		
CLE V: Effective date, if other than the		
effective date is listed, the date mus 0 days after the date of filing.)	t be specific and cannot be moi	re than five dusiness da
o days after the date of filing.)		
CLE VI: Other provisions, if any.		
		·
REQUIRED SIGNATURE:		
$\overline{}$ ϱ	er or an authorized representa	
toangela.	t. ag silva	
Signature of a memb	er or an authorized representa	tive of a member.
In accordance with section 605.0203 onstitutes an affirmation under the per	(1) (0), Florida Statutes, the executable facts st	ated herein are true
am aware that any false information s	submitted in a document to the D	epartment of State
onstitutes a third degree felony as pro		
	vided for in s.817.155, F.S.)	•
DOCAMOE! + = =	,	,
ROSANGELA F. D	, , , , , , , , , , , , , , , , , , ,	<u>. </u>
ROSANGELA F. D	,	<u> </u>

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)