(Re	equestor's Name)	
(Ac	idress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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WAR 3 1 2015 J. HARRIS

# **COVER LETTER**

TO: Registr		Section orporations				
		•				
SUBJECT: 14	UTNI	& BODY, LLC	of Re	sulting Florida	Limi	ited Company)
				_		
						and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return a	li corre	espondence concernin	g thi	s matter to:		
PEDRO J. M.	ALAR	ET				
-		(Contact Person)	•			
MALARET LA	W FI	RM, PLC				
		(Firm/Company)				
P.O. BOX 45	79					
		(Address)				
ORLANDO, F	L 328	302				
	((	City, State and Zip Code)				
pedro@mala	retlaw	firm.com				
E-mail Addres	ss: (to b	e used for future annual re	port r	notifications)		
For further info	ormati	on concerning this ma	tter,	please call:		
Pedro Malare	t		at	(407	34	0-3655
(Name o	f Conta	ct Person)		(Area Code)	(D	aytime Telephone Number)
Enclosed is a c	heck f	or the following amou	ınt:			
\$150.00 Filing (\$25 for Conversi & \$125 for Articl of Organization)	on	\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Cop		□\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADI		S:				ADDRESS:
Registration Se Division of Co		ions				n Section Corporations
Clifton Buildir	•	IOII3		P. O. B		
2661 Executive	_	er Circle		Tallaha	ssee	e, FL 32314

Tallahassee, FL 32301

Contract Con



March 6, 2015

PEDRO J MALARET MALARET LAW FIRM, PLC P.O. BOX 4579 ORLANDO, FL 32802

SUBJECT: NUTRI & BODY, LLC Ref. Number: W15000012074

We have received your document for NUTRI & BODY, 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):

You failed to make the correction(s) requested in our previous letter.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 615A00004702

2015 HAR 27 AH II: 23
SECRETARY OF STATE



February 18, 2015

PEDRO J MALARET MALARET LAW FIRM, PLC P.O. BOX 4579 ORLANDO, FL 32802

SUBJECT: NUTRI & BODY, LLC Ref. Number: W15000012074

We have received your document for NUTRI & BODY, 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

You must submit Articles of Organization for the resulting Florida limited liability company along with the Certificate of Conversion. The Articles of Organization must be signed by a member or an authorized representative of a member.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 915A00003474

2015 MAR 27 AH II: 23

# **Articles of Conversion**

For

# "Other Business Entity"

Into

# Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

1. The name of the "Other Business NUTRI & BODY, INC.	Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter	Name of Other Business Entity)
2. The Other Business Entity is a	CORPORATION  Enter entity type. Example: corporation, limited partnership.
(1	general partnership, common law or business trust, etc.)
First organized, formed or incorporat	ed under the laws of FLORIDA
on FEBRUARY 11, 2013	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incor	poration)
3. The name of the Florida Limited I	Liability Company as set forth in the attached Articles of Organization:
NUTRI & BODY, LLC	
(Enter Name of	Florida Limited Liability Company)
(The effective date: 1) cannot be p date this document is filed by the F	g, enter the effective date:  rior to date of receipt or filed date nor more than 90 days after the lorida Department of State; AND 2) must be the same as the effective of Organization, if an effective date is listed therein.)
5. The plan of conversion has been a	oproved in accordance with all applicable statutes.

Page 1 of 2

2015 HAR 27 AM II: 23 Secretary of State

Signed this 26 day of SEPTEMBER	20 <u>14</u>	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative:**		
Printed Name: CLEIDE M. VIEIRA RODRIGUES	Title: MANAGER	
Signature(s) on habilf of Other Pusinger Entity.	(See below for magnined signature(s)	
Signature(s) on behalf of Other Business Entity:	see below for required signature(s).	
Signature: ** Printed Name: CLEIDE M. VIEIRA RODRIGUES	THE DECIDENT	
Printed Name: OLEIDE IVI. VIEINA HODNIGUES	Title: FRESIDENT	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	_ Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florido Corneration.		
<u>If Florida Corporation:</u> 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.	-	
If Florida Limited Partnership or Limited Liabilit	ty Limited Partnership:	
Signatures of <u>ALL</u> General Partners.	y zamed i di mership.	
All others:		
Signature of an authorized person.		
		<b>⇒</b> c/>
Fees:		EC.
Articles of Conversion:	\$25.00	HA EEEE
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Outlines!)	SSE
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)	m <sub>C</sub>
Confidence of States.	Ψυτου (Optional)	. الس

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability  NUTRI & BODY, LLC  (Must end wi		iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	lress of the principal off	ice of the Limited Liability Company is:
Principal Office Address:		Mailing Address:
562 8 INTERNATIONAL DRIVE ORLANDO, FL 32819	<u> </u>	5138 INTERNATIONAL DRIVE: ORLANDO, FL 32819
another business entity with an act The name and the Florida street ad	annot serve as its own R tive Florida registration.	egistered Agent. You must designate an individual or )
250 N. OF	RANGE AVENUE . 5	ite III4
Florida str	RANGE AVENUE 5 reet address (P.O. Box 1	NOT acceptable)
ORLANDO	O City	<u>FL 32801</u> Zip
the place designated in this cert capacity. I further agree to comp	tificate, I hereby accept to foly with the provisions of with and accept the oblig	ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance tations of my position as registered agent as provided for in 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

2015 MAR 27 AM II: 23

<u>litle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	01 51D5 14 1451D4 D0DD101150
MGR	CLEI <u>DE M. VIEIRA-RODRIG</u> UES
	5624 INTERNATIONAL DR.
	ORLANDO, FL 32819
V: Effective date, if other than the date tive date is listed, the date must be sp	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or
V: Effective date, if other than the date tive date is listed, the date must be sp filing.)	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or
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V: Effective date, if other than the date tive date is listed, the date must be sp filing.)  VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a me (In accordance with section 60)	ember or an authorized representative of a member.
V: Effective date, if other than the date tive date is listed, the date must be sp filing.)  VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a me (In accordance with section 60 constitutes an affirmation under the constitutes are affirmation under the constitutes are affirmation under the constitutes.	ember or an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true.
V: Effective date, if other than the date rive date is listed, the date must be spliling.)  VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor	ember or an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true, rmation submitted in a document to the Department of State
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**ARTICLE IV-**

Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)