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(Requestor's Name) (Address)	500274799015
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL	09/11/1501001024 **150.00
(Business Entity Name) (Document Number)	
Certified Copies Certificates of Status	SUFFICIENCY OF FILMO
Office Use Only	15 SEP
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CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222	
DEVELOPMENT BEAUTY, INC.	
	Art of Inc. File conversion
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
	Ficilitous Owner Search
Signature	Vehicle Search
	Driving Record
Requested by: ba	UCC 1 or 3 File
9/10	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

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<u>Articles of Conversion</u> For <u>"Other Business Entity"</u> Into Florida Limited Liability Company

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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.

Dévélopment l	e of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Beauty, Inc. <u>P15 - 220161</u> (Enter Name of Other Business Entity)
2. The "Oth	er Business Entity" is a <u>Corporation</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organiz	ed, formed or incorporated under the laws of
on September	I write state or it a new I & antity the news of the submetual
3. The name	of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Development E	Peauty, LLC
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Enter Name of Florida Limited Liability Company)
	ctive on the date of filing, enter the effective date: e date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the

(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the northern is effective date on the Department of State statutory filing requirements.

5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

FILED SECRE LARY OF STATE IVISION OF CORPORATIONS 15 SEP 10 AH 10: 00

Signed this	9th day of September	20 <u>15</u>			
<u>Signature</u>	of Authorized Representative of Lim	ited Liability Company:			
Signature o Printed Nan	f Authorized Representative:	Erez Maman Title: <u>Managing Member</u>			
<u>Signature(s</u>) on behalf of Other Business Entity:	[See below for required signature(s)]			
	/s/ Erez Maman			· .	
Printed Nam	e: Erez Maman	Title: President			
Signature: Printed Nam		Title:			
Signature: _				,	
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Printed Nam	e	Title:			
-	orporation: Chairman, Vice Chairman, Director, or Officers have not been selected, an In		•		
	eneral Partnership or Limited Liabili one General Partner.	ty <u>Rartnership:</u>			
-			:		N N
	mited Partnership or Limited Liabili ALL General Partners.	ty Limited Partnership:		5 SEP	SIGH
<u>All others:</u> Signature of	an authorized person.			10	DE CUE
Fees:				AM 10:	L CURPORATIONS
∆ retio	les of Conversion:	\$25.00		00	n See
(for Florida Articles of Organization:	\$125.00			<u>7</u> 7
Certi	fied Copy:	\$30.00 (Optional)			
Certi	ficate of Status:	\$5.00 (Optional)			
	:	Page 2 of 2			
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Development Beauty, 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:

Mailing Address:

100 South Biscayne Boulevard Suite 800 Miami, FL 33131 100 South Biscayne Boulevard Suite 800 Miami, FL 33131

10 AM JO: 00

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:

Aaron Davis

Name

1221 Brickell Avenue, Suite 1600

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

Miami FL 33131 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. Thereby 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.

> /s/ Aaron Davis Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

Page 1 of 2

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

AGR" = Manager		
MBR, MGR	Erez Maman	
	100 Biscayne Boulevard, Suite 800	
	Miami, FL 33131	
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		AHIO
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ARTICLE V: Effective date, if other than the date of filing: _______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements; this date will not be listed as the document is effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

NEV	<u>UIRED</u> SIGNATURE:
	/s/ Erez Maman
	Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. 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.
	Erez Maman
	Typed or printed name of signee
	Filing Fees
\$1	25.00 Filing Fee for Articles of Organization and Designation of Registered A
\$	30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)