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| Special Instructions to I | Filing Officer: | |
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COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: Sweet WATER FASHIONS LLC |
| (Name of Resulting Florida Limited Company) |
| The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. |
| Please return all correspondence concerning this matter to: |
| Luz Marina Blacker (Contact Person) |
| Sweet water Fashione uc |
| 53 Faieuxey Oaks Lame |
| (Address) $(O') = C \cdot C$ |
| (City State and Zip Code) |
| Sweetwater fashions @ Smail.com E-mail Address: (to be used for future annual report notifications) |
| For further information concerning this matter, please call: |
| Avame of Contact Person) Area Code) (Daytime Telephone Number) |
| (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$150.00 Filing Fees (\$25 for Conversion & Status \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of Status \$180.00 Filing Fees and Certified Copy & Certified Copy, and Certificate of Status |
| STREET ADDRESS: MAILING ADDRESS: |
| Registration Section Registration Section Division of Corporations Division of Corporations |

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

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 Entity" immediately prior to the filing of the Article Swell Man Fash one Lec. | s of Con | versio | n is: |
|---|--|---------|----------------------------|
| (Enter Name of Other Business Entity) | | | |
| 2. The "Other Business Entity" is a | | | |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) | | | |
| First organized, formed or incorporated under the laws of <u>Colocado</u> . 570 | ate_ | | |
| on 10-02.2013 10-20131092703 (date of organization formation or incorporation) | iame of the | ; count | ry) |
| (date of organization, formation or incorporation) | | | |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Artic | les of Oı | rganiz | zation: |
| Sweet WATER FASHIONS LLC | | | |
| (Enter Name of Florida Limited Liability Company) | | | |
| 4. If not effective on the date of filing, enter the effective date: 09-24-2015 | > | | |
| (The effective date: 1) cannot be prior to date of receipt or filed date nor more than date this document is filed by the Florida Department of State; AND 2) must be the | 90 days | | |
| date listed in the attached Articles of Organization, if an effective date is listed there Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records. | ein.) | | |
| 5. The plan of conversion has been approved in accordance with all applicable statutes. | | ज | |
| Page 1 of 2 | | SEP 28 | # g . , # +++ 9 xx#* |
| | 100 mg | 720v | C |

| Signed this 24 day of September | _20 <u>/5</u> . | | | |
|---|--|--|----------|----------|
| Signature of Authorized Representative of Limi | ted Liability Company: | | | |
| Signature of Authorized Representative: Printed Name: | Title: DIRECTOR | _ | | |
| Signature(s) on behalf of Other Business Entity: | See below for required signature(s) | | | |
| Signature:Printed Name: | Title: | <u>-</u> | | |
| Signature:Printed Name: | mul. | _ | | |
| | | | | |
| Signature: Printed Name: | _ Title: | - - | | |
| Signature: Printed Name: | Title: | – | | |
| Signature:Printed Name: | Title: | - | | |
| Signature:Printed Name: | | _ | | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. | Officer. | - | | |
| If Florida General Partnership or Limited Liability Signature of one General Partner. | y Partnership: | | | |
| If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners. | y Limited Partnership: | | | |
| All others: Signature of an authorized person. | |)* <u></u> | ਲੀ | |
| Fees: | | 10000000000000000000000000000000000000 | SEP 2 | <u>.</u> |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) | A CONTRACTOR | S AN I:4 | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | |
|--|--|
| SWOT WATER FAX (Must end with the words "Limited Liability | |
| (Must end with the words "Limited Liability | Company, C.L.C., or LLC. |
| ARTICLE II - Address: The mailing address and street address of the prin | cipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 53 Failway Oaks Lane Ospray, FL 34229 | 53 Failway OMS LANE OSPRBY FL 34229 |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.) | Office, & Registered Agent's Signature: ed Agent. You must designate an individual or another |
| The name and the Florida street address of the reg | gistered agent are: |
| / 02 Mar | ujo Baken |
| 53 FAIRMA | ewa Backen Ook Jame |
| Florida street address (P.O. I | |
| | |
| Spelly distri | FL 34229 |
| γγιγ | Σip |
| liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe | accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S |
| | JAM 15 8 |
| Registered Agent's Signat | ture (REQUIRED) |
| (CONTINU | MA TO MAKE THE TOTAL THE T |
| Page 1 of 2 | 74 34 |

| <u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager | Name and Address: |
|--|--|
| MGR. | Luz Marina Blacker 53 Fareway aks Jone Osprey, 7234219 |
| | |
| | |
| (Use attachment if necessary) | |
| CLE V: Effective date, if other than effective date is listed, the date model of days after the date of filing.) | the date of filing: <u>09-24-20/5</u> . (OPTIONAL) ust be specific and cannot be more than five business day neet the applicable statutory filing requirements, this date will not be listed tate's records. |
| CLE V: Effective date, if other than effective date is listed, the date mode days after the date of filing.) If the date inserted in this block does not mont's effective date on the Department of Security 1985. | ust be specific and cannot be more than five business day neet the applicable statutory filing requirements, this date will not be liste |
| CLE V: Effective date, if other than effective date is listed, the date mode days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of SCCLE VI: Other provisions, if any. REQUIRED SIGNATURE: | neet the applicable statutory filing requirements, this date will not be listed tate's records. |

ARTICLE IV-

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)