L160001k454

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000280868900

01/19/16--01041--002 **150.00



COVER LETTER

Ø,

10:	Division of Corporations		
SUBJI	ECT: Ice Goddess 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:

Michael Banner			44
	(Contact Person)		750
SmallBiz.com			70 %
	(Firm/Company)		£ \$25
P.O. Box 13092			(B
	(Address)		7,29
Tucson, AZ 85732	2		50.
(City, State and Zip Code)		712
samcpa@jarrarcpa	a.com		6,2
E-mail Address: (to b	oe used for future annual re	port notifications)	# Z)
For further informati	on concerning this ma	tter, please call:	, 8
Nadeen Jahn		at (520)88	1-3989
(Name of Conta	act Person)		aytime Telephone Number)
Enclosed is a check	for the following amou	ınt:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAILING	ADDRESS:
Registration Section		Registration	
Division of Corporat	ions		Corporations
Clifton Building	or Cirolo	P. O. Box 63	

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The state of the s

16 JAN 19 PM 3: 06

SECRETARY OF STATE TALLAHASSEE FLORIDA

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 Articles of Corlce Goddess LLC .	nversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Limited Liability Company	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of California	
5/7/2014 (Enter state, or if a non-U.S. entity, the name of tr	he country)
on (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of O)rganization:
Ice Goddess LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days date this document is filed by the Florida Department of State; AND 2) must be the same as date listed in the attached Articles of Organization, if an effective date is listed therein.)	
5. The plan of conversion has been approved in accordance with ss. 605 1041-605 1046	

Page 1 of 2

Signed this 15 day of Juvy	
Signature of Authorized Representative of Lim	ited Ligbility Company:
Signature of Authorized Representative: Lilux Printed Name: William Weeks	Title: Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature: /) / (V) Lu Printed Name: William Weeks	Ny
Printed Name: William Weeks	Title: Member
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Ice Goddess LLC	1177 C
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12796 Mizner Way	12796 Mizner Way
Wellington, FL 33414	Wellington, FL 33414
business entity with an active Florida registration.) The name and the Florida street address of the Milliam Weeks No. 12796 Mizner Way	he registered agent are: ame P.O. Box NOT acceptable)
<u>Wellington</u> City	FL 33414 Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as	and to accept service of process for the above stated limited and in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and a registered agent as provided for in Chapter 605, F.S

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Membe	er
"MGR" = Manager	AAPH! AAI I
AMBR	William Weeks
	12796 Mizner Way
	Wellington, FL 33414
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	<u> </u>
	TLORIDE TO STATE
	D C
LE V: Effective date, if other the	nan the date of filing: (OPTIONAI must be specific and cannot be more than five business da
LE V: Effective date, if other the fective date is listed, the date days after the date of filing.) LE VI: Other provisions, if any REQUIRED SIGNATURE:	must be specific and cannot be more than five business da
LE V: Effective date, if other the fective date is listed, the date days after the date of filing.) LE VI: Other provisions, if any REQUIRED SIGNATURE: Signature of a manaccordance with section 605.0 stitutes an affirmation under the naware that any false information.	must be specific and cannot be more than five business da
LE V: Effective date, if other the fective date is listed, the date days after the date of filing.) LE VI: Other provisions, if any REQUIRED SIGNATURE: Signature of a manaccordance with section 605.0 astitutes an affirmation under the naware that any false informatistitutes a third degree felony as	ember or an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true. ion submitted in a document to the Department of State
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Page 2 of 2

\$ 5.00 Certificate of Status (Optional)