# 1110000030514

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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## CORPORATE ACCESS, \_\_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### **WALK IN**

		PICK UP:		2/15 GLINDA				
	XX	CERTIFIED COPY						
		РНОТОСОРУ						
	хх	CUS						
	хх	FILING	Conve	rsion				
1.		CHEF CREATIONS, LLC (CORPORATE NAME AND DOCUMEN	NT #)					
2.	_							
		(CORPORATE NAME AND DOCUMEN	NT #)					
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SPI	SPECIAL INSTRUCTIONS:							
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#### **COVER LETTER**

TO:	Registration 5 Division of C							
SUBJE	ECT: Chef Cre	ations, LLC						
., ., ., .,		(Name	of Resulting Florida	Limite	d Company)			
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.			
Please	return all corr	espondence concerning	g this matter to:					
Robert F	2. Saltsman							
······································		(Contact Person)						
Robert f	P. Saltsman, P.A.							
		(Firm/Company)						
222 S. P	ENNSYLVANI	A AVENUE, SUITE 200						
		(Address)						
WINTE	R PARK, FL. 32	789						
	,	City, State and Zip Code)						
	saltsmanpa.com							
li-ma	iil Address: (to b	e used for future annual re	port notifications)					
For fur	ther information	on concerning this ma	tter, please call:					
Nancy J. Calhoun			_at (	647-2	2899			
(Name of Contact Person)		(Area Code) (Daytime Telephone Number)		time Telephone Number)				
Enclose	Enclosed is a check for the following amount:							
(\$25 for	00 Filing Fees Conversion for Articles ization)	☐\$155.00 Filing Fees and Centificate of Status	□\$180.00 Filing and Certified Copy		X\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			Registra Division P. O. Bo	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				

INHS11 (06/15)

#### 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Chef Creations, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Florida  August 29, 2001 (Enter state, or if a non-U.S. entity, the name of the country)
On August 29, 2001 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Chef Creations, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: February 17, 2016
(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; AND 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 document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

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SEGRETARY OF STATE
TAIL AND SEGRET AND A

Signed this 15 day of February	20 16			
Signature of Authorized Representative of Limi				
Signature of Authorized Representative:	Title: Manager			
Signature(s) on behalf of Other Business Entity:	<del>-</del>	-		
Signature: The Valles Printed Name: Hal Valles	_ Title: President/Director	<del>-</del>		
Signature: A. Garcia, III	Title: Director	<del></del>		
Signature:Printed Name:	Title	_		
Signature:		-		
Printed Name:		-		
Signature: Printed Name:	Title:	<b>-</b>		
Signature:Printed Name:		<b>.</b>		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc.				
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:			
All others: Signature of an authorized person.		E	5	
Fees:			633	71
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	SSEE, FLORIDA	15 12: 01	

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Chef Creations, 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 printing address and street address of the printing address.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
222 S. PENNSYLVANIA AVENUE, SUITE 200	222 S. PENNSYLVANIA AVENUE, SUITI
WINTER PARK, FL 32789	WINTER PARK, FL 32789
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the re  Robert P. Saltsman, P.A.	ed Agent. You must designate an individual or another
Name	No. of the second secon
222 S. PENNSYLVANIA AVENU Florida street address (P.O.	······································
WINTER PARK, FL 32789	FL
City	Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe accept the obligations of my position as regi	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. 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
Potet Sa	LOS
Registered Agent's Signa	ture (REQUIRED)
(CONTINU Page 1 of 2	

Title:  "AMBR" = Authorized Member  "MGR" = Manager MGR  Hal Valdes  222 S. PENNSYLVANIA AVENUE, SUITE 200 WINTER PARK, FL 32789  (Use attachment if necessary)  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.)  Nate: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  ARTICLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a member or an authorized representative of a member. O  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 \$8.71.15.5, F.S.	TP:Al.			NI. 1 4 1 1		
ARTICLE VI: Other provisions, if any.  Hal Valdes  222 S. PENNSYLVANIA AVENUE, SUITE 200  WINTER PARK, FL 32789  (Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:	"AMI	"AMBR" = Authorized Member		Name and Address:		
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ARTICLE IV-

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) Page 2 of 2

Typed or printed name of signee

Hal Valdes