# L16000119544

(R	equestor's Name	)
(A	ddress)	
(A	ddress)	•
(C	ity/State/Zip/Pho	ne #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Na	ame)
(D	ocument Numbe	r)
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer:	
	·	

Office Use Only



100284976411

06/09/16--01018--016 \*\*155.00



N. Cuiligan (6 (26/14

## COVER LETTER

	tion Section of Corporations		
SUBJECT: Ca	ribTouchLLC		
		e of Resulting Florida L	imited Company)
The enclosed A: Business Entity	rticles of Conversion, Arti " into a "Florida Limited I	icles of Organization Liability Company"	a, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all	correspondence concerni	ng this matter to:	
Rohan Lee			
	(Contact Person)		
Carib Touch LLC			
	(Firm/Company)		
1534 SW 66th Dr.			
	(Address)		
Gainesville, FL 32	2607		
	(City, State and Zip Code)		
rncllee@gmail.co			
E-mail Address	: (to be used for future annual r	eport notifications)	
For further infor	mation concerning this ma	atter, please call:	
Rohan Lee		at ( <sup>319</sup> )	95-9204
(Name of	Contact Person)		(Daytime Telephone Number)
Enclosed is a ch	eck for the following amo	unt:	
\$150.00 Filing F (\$25 for Conversion & \$125 for Articles of Organization)	and Certificate of	□\$180.00 Filing Fe and Certified Copy	es \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADD	RESS:	MAILIN	G ADDRESS:
Registration See		~	on Section
Division of Corp Clifton Building		Division of P. O. Box	of Corporations 6327
2661 Executive			ee, FL 32314
Tallahassee, FL	32301		

INHS11 (06/15)



Signed.
on behalf of Other Entoly
Broiness Entoly

### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 15, 2016

ROHAN LEE 1534 SW 66TH DR GAINESVILLE, FL 32607

SUBJECT: CARIB TOUCH LLC Ref. Number: W16000043190 RECEIVED

16 JUN 24 PN 1: 23

We have received your document for CARIB TOUCH LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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) 245-6052.

Neysa Culligan Regulatory Specialist II

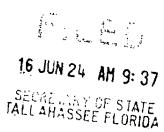
Letter Number: 716A00012546

# 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 Bu Carib Touch LLC	siness Entity" immediately prior to the filing of the Articles of Conversion is:
	(Enter Name of Other Business Entity)
2. The "Other Business Entity	Limited Liability Company
,	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or inco	orporated under the laws of lowa
May 12th 2014	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation	or incorporation)
3. The name of the Florida Lin Carib Touch LLC	nited Liability Company as set forth in the attached Articles of Organization
(Enter i	Jame of Florida Limited Liability Company)
(The effective date: 1) cannodate this document is filed by date listed in the attached Ar	of filing, enter the effective date:  t be prior to date of receipt or filed date nor more than 90 days after the the Florida Department of State; AND 2) must be the same as the effectiticles of Organization, if an effective date is listed therein.)  k does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
5. The plan of conversion has b	been approved in accordance with all applicable statutes.

Page 1 of 2

Signed this 7th day of June	20_16
Signature of Authorized Representative of Lim	•
Signature of Authorized Representative: 16 Printed Name: Rohan Lee	u Leo-
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Rolan Lee Printed Name: RoHAN LEE	_ Title: _ OWNEL
Signature:	
Signature:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Tale
rinted Name:	1 itte:
If Florida Corporation:	000
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
in Directors of Officers have not been selected, all in	corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fces:	
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

The name of the Limited Liability Company	v is:	
Sompan,		
Carib Touch LLC		
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address:		
The mailing address and street address of the	ne principal office of the Limited Liab	oility Company is:
Principal Office Address:	Mailing Address:	
1534 SW 66th Dr.	1534 SW 66th Dr.	
Gainesville, FL 32607	Gainesville, FL 32607	<del></del>
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)  The name and the Florida street address of the Reben Lee	ered Office, & Registered Agent's S Registered Agent. You must designate an individua	al or another
(The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)  The name and the Florida street address of t  Rohan Lee	ered Office, & Registered Agent's S Registered Agent. You must designate an individua the registered agent are:	al or another  16 JUN 24  SECRE AND
(The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)  The name and the Florida street address of t  Rohan Lee	ered Office, & Registered Agent's S Registered Agent. You must designate an individua	al or another  16 JUN 24 AM SECRETARY OF
(The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)  The name and the Florida street address of t  Rohan Lee  N  1534 SW 66th Dr.	ered Office, & Registered Agent's S Registered Agent. You must designate an individua the registered agent are:	al or another
(The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)  The name and the Florida street address of t  Rohan Lee  N  1534 SW 66th Dr.	ered Office, & Registered Agent's S Registered Agent. You must designate an individua the registered agent are:	al or another  16 JUN 24 AN 9:  ALLAHASSEE FLO

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, I hereby 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager	Nume una Madress.	
AMBR	Rohan Lee	
	1534 SW 66th Dr.	_
	Gainesville, FL 32607	_
		_
		_
		_
		_
		_
		_
		_
		_
		<del>-</del>
		_
	he date of filing: (OPTIC	
FICLE V: Effective date, if other than to an effective date is listed, the date must represent the date of filing.)  If the date inserted in this block does not mee	st be specific and cannot be more than five business the applicable statutory filing requirements, this date will n	ess day
FICLE V: Effective date, if other than to an effective date is listed, the date must result 90 days after the date of filing.)  If the date inserted in this block does not mee	st be specific and cannot be more than five business the applicable statutory filing requirements, this date will n	ess day
FICLE V: Effective date, if other than to effective date is listed, the date must represent 90 days after the date of filing.)  If the date inserted in this block does not meanner of Statement's effective date on the Department of Statement's	st be specific and cannot be more than five business the applicable statutory filing requirements, this date will n	ess day
FICLE V: Effective date, if other than to effective date is listed, the date must represent 90 days after the date of filing.)  If the date inserted in this block does not meanner of Statement's effective date on the Department of Statement's	st be specific and cannot be more than five business the applicable statutory filing requirements, this date will n	ess day
FICLE V: Effective date, if other than to effective date is listed, the date must represent 90 days after the date of filing.)  If the date inserted in this block does not meement's effective date on the Department of State of the Provisions, if any.	st be specific and cannot be more than five business the applicable statutory filing requirements, this date will n	ess day
ricle V: Effective date, if other than to neffective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meet nent's effective date on the Department of State of the North Picker VI: Other provisions, if any.	et the applicable statutory filing requirements, this date will nee's records.	ess day
FICLE V: Effective date, if other than to neffective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meen nent's effective date on the Department of State TICLE VI: Other provisions, if any.	et the applicable statutory filing requirements, this date will nee's records.	ess day
ricle V: Effective date, if other than to neffective date is listed, the date must 90 days after the date of filing.) If the date inserted in this block does not meen nent's effective date on the Department of State 'ICLE VI: Other provisions, if any.	et the applicable statutory filing requirements, this date will nee's records.	or be listed 16 JUN 24 AH
CICLE V: Effective date, if other than to effective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meen the effective date on the Department of State CICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	et the applicable statutory filing requirements, this date will nee's records.	ess day of be listed to be list
TICLE V: Effective date, if other than to neffective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meen the date of the Department of State of the	et the applicable statutory filing requirements, this date will nee's records.	ess day of be listed to the li
TICLE V: Effective date, if other than to neffective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meen the date of the Department of State of the Department of State of CICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a membrane of this document is executed in I am aware that any false information of the date of t	et the applicable statutory filing requirements, this date will ne's records.	ess day of be listed to the li
PICLE V: Effective date, if other than to neffective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meenent's effective date on the Department of State of Ticle VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a membrane of the degree felow constitutes a third degree felow Rohan Lee	et the applicable statutory filing requirements, this date will ne's records.  Proper or an authorized representative of a member accordance with section 605.0203 (1) (b), Florida Statutes, my as provided for in s.817.155, F.S.	ess day of be listed to the li
PICLE V: Effective date, if other than to neffective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meet ment's effective date on the Department of State of of State of State of State of State of the Department of State of	et the applicable statutory filing requirements, this date will ne's records.  Proper or an authorized representative of a member accordance with section 605.0203 (1) (b), Florida Statutes, my as provided for in s.817.155, F.S.	ess day of be listed to the li
PICLE V: Effective date, if other than to the effective date is listed, the date must be a softened in this block does not meet the effective date on the Department of State of the Provisions, if any.    REQUIRED SIGNATURE:   Signature of a member of the provisions of the provision	et the applicable statutory filing requirements, this date will nee's records.  Per or an authorized representative of a member accordance with section 605.0203 (1) (b), Florida Statutes, rmation submitted in a document to the Department of State my as provided for in s.817.155, F.S.  Typed or printed name of signee  Filing Fees	ess day of be listed to be list
FICLE V: Effective date, if other than to an effective date is listed, the date must represent the date of filing.)  If the date inserted in this block does not meet ment's effective date on the Department of State of State of the Department of State of State of State of the Department of State of S	et the applicable statutory filing requirements, this date will nee's records.  A compared to the applicable statutory filing requirements, this date will nee's records.  A compared to the applicable statutory filing requirements, this date will nee's records.  A compared to the applicable statutory filing requirements, this date will nee's records.  A compared to the applicable statutory filing requirements, this date will nee's records.	ess day of be listed to be list

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

ARTICLE IV-