

L16000163353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

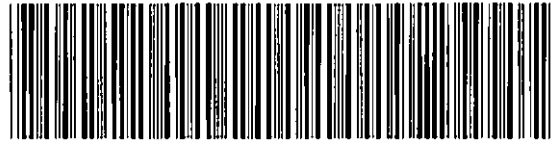
(Document Number)

Certified Copies _____

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Office Use Only



200396062622

Conversion

2022 OCT 18 AM 11:32

FILED

A. RAMSEY
OCT 21 2022

2022 OCT 18 AM 11:28

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 19, 2022

CORPORATION SERVICE COMPANY

TALLAHASSEE, FL 32301

SUBJECT: FORMULA Z COSMETICS, LLC
Ref. Number: L16000163353

RESUBMIT

Please give original
submission date as file date.

We have received your document for FORMULA Z COSMETICS, LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

Please fill in the street and mailing address in paragraph 6 (a) on page 2.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

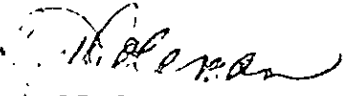
If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey
OPS

Letter Number: 822A00023411

2022 OCT 20 PM 3:34

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 057650 4332362
AUTHORIZATION : 
COST LIMIT : \$ 25.0

ORDER DATE : October 17, 2022
ORDER TIME : 9:32 AM
ORDER NO. : 057650-005
CUSTOMER NO: 4332362

DOMESTIC AMENDMENT FILING

NAME: FORMULA Z COSMETICS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS: _____

FILED

Articles of Conversion
For
Florida Limited Liability Company
Into
"Converted or Other Business Entity"

2022 OCT 18 AM 11:32

2022 OCT 18 AM 11:32

The Articles of Conversion is submitted to convert the following **Florida Limited Liability Company into an "Other Business Entity"** in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:

Formula Z Cosmetics, LLC

Enter Name of Florida Limited Liability Company

2. The name of the "Converted or Other Business Entity" is:

Formula Z Cosmetics, LLC

Enter Name of "Converted or Other Business Entity"

3. The "Converted or Other Business Entity" is a **limited liability company**
(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)

organized, formed or incorporated under the laws of **Delaware**
(Enter state, or if a non-U.S. entity, the name of the country)

on **October 17, 2022**
(Date of organization, formation or incorporation)

and the formation document is attached (if applicable).

4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.

5. This conversion shall be effective in Florida on: **October 17, 2022**
(The effective date: 1) cannot be prior to 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 of the conversion under the laws governing the "Other Business Entity.")

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.

6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":

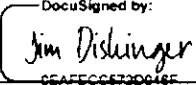
a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address: 17 Westwood Ave. Westwood, NJ 07675

Mailing Address: 17 Westwood Ave. Westwood, NJ 07675

7. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 17th day of October, 2022

Signature: 
Must be signed by a Member or Authorized Representative

Printed Name: James Dishinger Title: Authorized Representative

Fees: Filing Fee: \$25.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)