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2016 SEP 19 AN 8: 07
SEP FROM STATE
TALLAHASSEE, FLORIDA



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DUARTE'S RARDER Shop 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:
Riguberto Duarte (Contact Person) LDuarte 3 Rarber Shop LLC
(Firm/Company)
2497 10th Que. N (Address)
Lake Worth FL 33461 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Rigobeeto Dusate at (561) 5060736
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\sqrt{150.00 Filing Fees}
STREET ADDRESS: Registration Section Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301



July 27, 2016

RIGOBERTO DUARTE 2449 FLORIDA MANGO RD WEST PALM BEACH, FL 33406

SUBJECT: DUARTE'S BARBER SHOP INC

Ref. Number: W16000052118

We have received your document for DUARTE'S BARBER SHOP INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The correct forms are enclosed.

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 716A00015662



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2016

RIQOBERTO DUARTE 2497 10th AVE. N LAKE WORTH, FL 33461

SUBJECT: DUARTE'S BARBERSHOP INC

Ref. Number: W16000056879

We have received your document for DUARTE'S BARBERSHOP INC and your check(s) totaling \$150.00. 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 the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 416A00017302

Articles of Conversion

For

FILED

"Other Business Entity"
Into

2016 SEP 19 AM 8: 08

Florida Limited Liability Company

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 Conversion is: Divide Sold Sold For Pla-43273.
Dwete's Roebee Shop Inc Pla-43223. (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of FLORICA (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 Limited Liability Company as set forth in the attached Articles of Organization:
Duarte's Borber Shop, LLC.
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

Signed this 1st day of August	20 \ .
Signature of Authorized Representative of Limi	ted Liability Compary LED
Signature of Authorized Representative: Printed Name: Raphersho Duorsh	Title: managena member
Signature(s) on behalf of Other Business Entity:	TALLAHASSEE. FLORIDA See below for required signature(s)
Signature: Printed Name: Paparato Di Nach	Title: OWNER President
Signature: Printed Name:	_Title:
Signature:Printed Name:	
Signature: Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Indiana.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
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 is:

ARTICLE II - Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Rigoberto Duarte

2449 FLORICA Harpo Ro Florida street address (P.O. Box NOT acceptable)

West Palm Beach FL 334106
City 7in

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Pigoberto Duarto 2449 Florida Mongo Rd 248 FL 33406
	
(Use attachment if necessary)	
CLE V: Effective date, if other than teffective date is listed, the date must 0 days after the date of filing.) If the date inserted in this block does not meet	the date of filing: (OPTIONAL) st be specific and cannot be more than five business day et the applicable statutory filing requirements, this date will not be liste te's records.
CLE V: Effective date, if other than the effective date is listed, the date must 0 days after the date of filing.) If the date inserted in this block does not meant's effective date on the Department of States.	st be specific and cannot be more than five business day et the applicable statutory filing requirements, this date will not be liste
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CLE V: Effective date, if other than the effective date is listed, the date must to days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of Star CLE VI: Other provisions, if any.	et the applicable statutory filing requirements, this date will not be liste te's records.
CLE V: Effective date, if other than the effective date is listed, the date must to days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of State CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of the department of a member of the date o	et the applicable statutory filing requirements, this date will not be liste te's records.

Page 2 of 2

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

ARTICLE IV-

Company: