L17000039854

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

T. BURCH

COVER LETTER

TO: Registration Section Division of Corporations



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2017

DANIELLE HENDRIX 2017 POND RIDGE COURT #1004 FLEMING ISLAND, FL 32003

SUBJECT: ECCE DESIGN STUDIO, LLC

Ref. Number: W17000010089

We have received your document for ECCE DESIGN STUDIO, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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 vour filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist III

www.sunbiz.org

Letter Number: 817A00002245

17 FEB 21 PH 1: 05 SECRETARY OF STATE AND ARRANSSEE, FLORED

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 Business Entity" immediately prior to the filing of the Articles of Conversion is: Ecre Design Studio, L.C. (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>limited limbility Corporation</u> . (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
Face Design Studio, 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 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.

Page 1 of 2

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 31 day of Jurillary	_20_19				
Signature of Authorized Representative of Limited Liability Company:					
Signature of Authorized Representative: Aviva	Title: Owner / President				
Signature(s) on behalf of Other Business Entity:					
Signature: Junion Danielle Hendri					
Printed Name: Jerri Danielle Hendry	L Title: Owner / President				
Signature: Printed Name:					
Printed Name:	Title:				
Signature: Printed Name:					
Printed Name:	Title:				
Signature:Printed Name:					
Printed Name:	Title:				
Signature:	m: I				
Printed Name:	litle:				
Signature:					
Printed Name:	Title:				
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.					
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.					
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

ECCE DESIGN ST	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street addres	s of the principal office of the Limited Liability Company is
Principal Office Address:	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 anothor business entity with an active Florida registration.)

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

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Name

2017 Pornal Ridge. (4, #1004

Florida street address (P.O. Box NOT acceptable)

Fleming Island FL 32003
City Zip

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 Agents Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Coı	mpany:		
	le: MBR" = Authorized Member GR" = Manager 유어B은	Name and Address: Derri Danielle Hendrix 3017 Pond Ridge Ct. #1001 Flenning Island, FL 33003	
		20 20 20 20 20 20 20 20 20 20 20 20 20 2	F11 17 FEB 21
·	e attachment if necessary) V: Effective date, if other than the date	e of filing: (OPTI	PH 05
(If an effec to or 90 day Note: If the c	tive date is listed, the date must be s ys after the date of filing.)	pecific and cannot be more than five busin oplicable statutory filing requirements, this date will n	iess days prior
ARTICLE	VI: Other provisions, if any.		
RE	This document is executed in accord	an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes, a submitted in a document to the Department of State revided for in s.817.155, F.S.	 r.
		or printed name of signee Filing Fees ganization and Designation of Registered	Agent
	\$ 30.00 Certified Copy (Optional)	\$ 5.00 Certificate of Status (Optio Page 2 of 2	40

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

1 1 1

ARTICLE IV-