117000177414

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(200,000 2,000,000,000,000,000,000,000,00
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 7, 2017

MARIA C RIBERA 1555 STATE RD 436 #1191 WINTER PARK, FL 32792

SUBJECT: PIO-PIO KIDS SALON Ref. Number: W17000064254



We have received your document for PIO-PIO KIDS SALON and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE CONVERTING ENTITY MUST BE LISTED AS IT IS REGISTERED WITH OUR OFFICE.

The Certificate of Conversion must contain the name of the limited liability company as set forth in the attached articles of organization.

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

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.

Terri J Schroeder Regulatory Specialist III

Letter Number: 117A00015934

COVER LETTER

TO: New Filing S Division of C					
SUBJECT: PIO-PIO	KIDS SALON				
Sobject.		sulting Florida l	imited Co	mpany)	
	es of Conversion, Artic o a "Florida Limited L				
Please return all corr	espondence concernin	g this matter	to:		
MARIA C. RIBERA					
	(Contact Person)				
PIO-PIO KIDS SALON	, INC				·* 1
	(Firm/Company)				17
1555 STATE ROAD 436 SUITE 1191					AUG AUG
	(Address)				17 AUG 17
WINTER PARK, FL 32	792				AUG 17 PH 4: 02
(1	City, State and Zip Code)				
pio-piokidsalon@hotma	il.com				
E-mail Address: (to b	pe used for future annual re	port notification	ns)		2: 2
For further informati	on concerning this ma	tter, please ca	ıll:		
MARIA C. RIBERA		_at (³²¹	304-	1456	
(Name of Conta	act Person)	(Area C	ode) (Day	ytime Telephone Number	:)
	for the following amou a bank located in the			sed by this office mu	st be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Fi and Certified		☐\$185.00 Filing Fees Certified Copy, and Certificate of Status	in.
STREET ADDRES	S:	MA	ILING A	ADDRESS:	
New Filing Section		New Filing Section			
Division of Corporations		Division of Corporations			
~). Box 63		
2661 Executive Center Circle Tallaha		abaccaa	LT 27214		

Tallahassee, FL 32301

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.

(Enter Name a	P150004073. f Other Business Entity)
(Effer Name o	Tother business Entity)
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation	tion, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated und	FLORIDA er the laws of
e. gambea, remea er meerperated und	(Enter state, or if a non-U.S. entity, the name of the country)
04/29/2015 on	
on (date of organization, formation or incorporation	-·)
3. The name of the Florida Limited Liabilit	y Company as set forth in the attached Articles of Organization:
PIO-PIO KIDS SALON, LL C	
(Enter Name of Florida	Limited Liability Company)
4. If not effective on the date of filing, enter (The effective date: Cannot be prior to date)	the effective date: te of receipt or filed date nor more than 90 calendar days after
the date this document is filed by the Flor	
Note: If the date inserted in this block does not meet document's effective date on the Department of State	the applicable statutory filing requirements, this date will not be listed as the 's records.
5. The plan of conversion has been approved	I in accordance with all applicable statutes.
 The plan of conversion has been approved The "Converted or Other Business Entity" I which such members are entitled under ss. 	nas agreed to pay any members having appraisal rights the amount to

Signed this 28	day of JULY	20 <u>17</u>
Signature of Auth	orized Representative of Li	mited Liability Company:
Signature of Autho	rized Representative:	va C Elava
Printed Name: MARI	A C. RIBERA	Title: PRESIDENT
Signature(s) on bel	nalf of Other Business Entity	See below for required signatu
Signature: Mb2	a C. Ribera	
Printed Name: MARI	A C. RIBERA	Title: PRESIDENT
Signatura: MA	7 CM CHRIA	
Printed Name: MAZI	EN SHBIB	Title: VICE PRESIDENT
Signature:		Title:
rinico rame		THE.
Signature:		Title:
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
	tion: an, Vice Chairman, Director, c ers have not been selected, an l	
Signature of one General If Florida Limited Signatures of ALL CALL others:	<u>Partnership or Limited Liab</u> General Partners.	
Signature of one General Signatures of ALL Constitution All others: Signature of an authorise Signature of Si	neral Partner. <u>Partnership or Limited Liab</u> General Partners.	
Signature of one General Signatures of ALL Constitution of ALL Constitution of an authorise of aut	neral Partner. Partnership or Limited Liabi General Partners. orized person.	ility Limited Partnership:
Signature of one General Signatures of ALL (All others: Signature of an authorises: Articles of (neral Partner. Partnership or Limited Liabi General Partners. orized person. Conversion:	ility Limited Partnership: \$25.00
Signature of one General Signatures of ALL Constitution of ALL Constitution of All others: Signature of an authorises: Articles of Constitution of Constituti	neral Partner. Partnership or Limited Liabi General Partners. orized person. Conversion: rida Articles of Organization:	ility Limited Partnership: \$25.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

PIO-PIO KIDS SA	ALON, LLC.			
	(Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	<u> </u>	
ARTICLE II -	Address:			
		e principal office of the Limite	d Liability Company is	
Principal Offic	ee Address:	Mailing Address:		
1555 STATE ROAD 436		1555 STATE ROAD 436		
SUITE 1191		SUITE 1191		
WINTER PARK,	FL 32792	WINTER PARK, FL 32792		
The Limited Liabili business entity with		ered Office, & Registered Age Registered Agent. You must designate an i	ndividual or another	
The Limited Liabili business entity with	ty Company cannot serve as its own F i an active Florida registration.)	legistered Agent. You must designate an i	ndividual or another	
The Limited Liabili business entity with	ty Company cannot serve as its own F t an active Florida registration.) he Florida street address of t MARIA C. RIBERA	legistered Agent. You must designate an i	ndividual or another	
The Limited Liabili business entity with	ty Company cannot serve as its own F t an active Florida registration.) he Florida street address of t MARIA C. RIBERA	he registered agent are:	ndividual or another 17 AUG 17 I	
The Limited Liabili business entity with	ty Company cannot serve as its own Fit an active Florida registration.) he Florida street address of to MARIA C. RIBERA N 1555 STATE ROAD 436, SI	he registered agent are:	ndividual or another 17 AUG 17 I	
The Limited Liabili business entity with	ty Company cannot serve as its own Fit an active Florida registration.) he Florida street address of to MARIA C. RIBERA N 1555 STATE ROAD 436, SI	Registered Agent. You must designate an in the registered agent are: ame UTE 1191	ndividual or another 17 AUG 17 I	
The Limited Liabili business entity with	ty Company cannot serve as its own Fit an active Florida registration.) the Florida street address of to MARIA C. RIBERA N 1555 STATE ROAD 436, SI Florida street address (he registered Agent. You must designate an in the registered agent are: ame JITE 1191 P.O. Box <u>NOT</u> acceptable)	ndividual or another	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
PRESIDENT	MARIA C. RIBERA
	1555 STATE ROAD 436, SUITE 1191
	WINTER PARK, FL 32792
	
	
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any,	
CATICLE V. Other provisions, if any,	
<u>REQUIRED</u> SIGNATURE:	
PH & T	à C. Ribere
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
MARIA C. RIBERA	
Ту	ped or printed name of signee
	Entry En

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)