# L18000082857

(Re	questor's Name)	<del></del>
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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18 APR -4 AM 8: 25

SUCRETARY OF STATE

N CULLIGAN MAR 7 2018

# **COYER LETTER**

<b>TO:</b> New Filing S Division of C				
SUBJECT: Kelly Nai	ls by Quang LLC			
	(Name of Re	sulting Florida Limite	ed Cor	npany)
				id fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
Quang Cu				
_	(Contact Person)			
Kelly Nails by Quang				
	(Firm/Company)			
3906 Hwy 98 W, Suite 4				
	(Address)			
SANTA ROSA BEACH	FL 32459			
	City, State and Zip Code)			
quang0810@yahoo.com	,,			
	e used for future annual re	port notifications)		
For further information	on concerning this ma	iter, please call:		
Angie Hawker		_at (850	457-5	843
(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)
	or the following amou a bank located in the		roces	sed by this office must 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 Filing and Certified Copy		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILI	NG A	ADDRESS:
New Filing Section		New Fil		
Division of Corporati	ons	Division	n of C	Corporations
Clifton Building		P. O. Bo	ox 63.	27

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301



Division of Corporations

# RECEIVED 2018 APR -4 AMII: 18

TYPETCH OF COMMERCIAL BUREAU OF COMMERCIAL WEIGHMATION SERVICES

March 19, 2018

QUANG CU 3906 HWY 98 W, SUITE 4 SANTA ROSA BEACH, FL 32459

SUBJECT: KELLY NAILS BY QUANG LLC

Ref. Number: W18000021888

We have received your document for KELLY NAILS BY QUANG 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):

You failed to make the correction(s) requested in our previous letter.

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.

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: 518A00004570

# **Articles of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

FILED 18 APR -4 AM 8: 25

SECRETARY OF STATE

The Articles of Conversion and attached Articles of Organization 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: Kelly Nails by Quang INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
December 18, 2017 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Kelly Nails by Quang LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: March 7, 2018
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)  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.
5. The plan of conversion has been approved in accordance with all applicable statutes.

- 6. 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.

Signature of Authorized Representative:	
Signature of Authorized Representative:  Printed Name: Quang Cu	Title: Owner
Printed Name: Quang Cu	THO.
Signature(s) on behalf of Other Business Entity:	See below for required signature
Signature: Printed Name: Quang Cu	T'd Owner
Printed Name: Quang Cu	_ Title: Owner
Signature:	
Signature:Printed Name:	Title:
Signature:	Til
Printed Name:	_ little:
Signature:	
Signature: Printed Name:	_ Title:
Signature:Printed Name:	This
Printed Name:	_ 1 luc:
Signature:	
Printed Name:	Title:
If Floride Corneration:	Officer
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Interest of Control of Cont	corporator must sign.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In- If Florida General Partnership or Limited Liabili	corporator must sign.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Interest of Chairman, Director, or If Florida General Partnership or Limited Liabili Signature of one General Partner.  If Florida Limited Partnership or Limited Liabili	corporator must sign.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-  If Florida General Partnership or Limited Liabili Signature of one General Partner.  If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.  All others:	corporator must sign.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Interpretation of Control of	corporator must sign.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Interpretation of Control of	corporator must sign.  by Partnership:  ty Limited Partnership:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is	;;	
Kelly Nails by Quang LLC		
(Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
3906 HWY 98W, Suite 4	Same as Office address	
Santa Rosa Beach, FL 32459		<del></del>
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regional business entity with an active Florida registration.)	stered Agent. You must designate an individu	ual or another
The name and the Florida street address of the	registered agent are:	ACC AS TO
Quang Cu		ASS.
Nam	ne	T E P
3906 HWY 98W, suite 4		F SI
Florida street address (P.C	D. Box NOT acceptable)	: 25 ORBO
Santa Rosa Beach	FL 32459	<b>&gt;</b>
City	Zip	
Having been named as registered agent and the liability company at the place designated in registered agent and agree to act in this capact statutes relating to the proper and complete accept the obligations of my position as registered Agent's Signature.	n this certificate, I hereby accept the city. I further agree to comply with performance of my duties, and I an egistered agent as provided for in C	ne appointment as n the provisions of all n familiar with and

(CONTINUED)

#### ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager MGR	Quang Cu			
	3906 HWY 98W, suite 4			
	Santa Rosa Beach, FL 32459			
<u></u>				
(Use attachment if necessary)				
CLE V: Other provisions, if any.				
	<b>T</b>			
DEALIDED CLASSETTED.				
REQUIRED SIGNATURE:				
REQUIRED SIGNATURE:	CRET AH			
Signature of a member or a This document is executed in accordance wany false information submitted in a document	in authorized representative of a member with section 605 0203 (1) (b). Florida Statutes, Lam and that			
Signature of a member or a This document is executed in accordance y	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am away that seent to the Department of State constitutes a third degree ferony			
Signature of a member or a This document is executed in accordance wany false information submitted in a document	in authorized representative of a member with section 605 0203 (1) (b). Florida Statutes, Lam and that			

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)