# 18000194681

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





800314729238



JUN 2 6 2019 T SCHROEDER

# **COVER LETTER**

TO:	New Filing S Division of C				
CHDI	FITNESS	BY D-ZYNE, LLC			
SUBJ	ECT	(Name of Res	ulting Florida Limite	d Com	npany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corr	espondence concerning	g this matter to:		
TRAC	Y DANIELLO				
		(Contact Person)			
FINES	SS BY D-ZYNE, L	.LC			
-		(Firm/Company)			
2555 F	PGA Blvd Lot 350				
		(Address)			
Palm I	Beach Gardens, FL	. 33410			
	((	City, State and Zip Code)			
fitgirle	ohio@gmail.com				
E-r	nail Address: (to b	e used for future annual re	port notifications)		
For fu	ırther informati	on concerning this ma	tter, please call:		
Tracy	Daniello		_at ()	379-9	9151
	(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)
		or the following amou a bank located in the		ocess	sed by this office must be payable in US
(\$25 fc & \$125	0.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing F and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New I Divisi Clifto	EET ADDRES Filing Section ion of Corporat in Building Executive Cent	ions	New Fili Division P. O. Bo	ing Soloto of Cox 631	Corporations

Tallahassee, FL 32301

23

# **Articles of Conversion**

For

# "Other Business Entity"

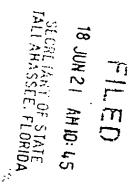
Into

# 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.

FITNESS BY D-ZYNE, 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
1/2/2008 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:  Fitness By D-Zyne, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(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.



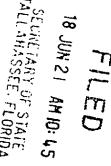
Signed this 18	day of <u>JUNE</u>	20_18
		of Limited Liability Company:
C' . CA Al-	orized Representative	1 Danielle
Printed Name: TRA	orized Representative	Title: MANAGING MEMBER
Trined Name.		
Signature(s) on be	half of Other Business E	ntity: [See below for required signature(s)]
Signature:	Dearle	
Signature: 7	CY DANIELLO	Title: OWNER/PRESIDENT
runed Name. TRA	<u> </u>	Title. Ownstarted
Signature:		
Printed Name:		Title:
Signature:		Title:
rtimed Name		1100.
Signature:		
Printed Name:		Title:
Signature:		Title
Printed Name:		Title:
Signature:		<u> </u>
Printed Name:		Title:
_		
If Florida Corpora		tor or Officer
	nan, Vice Chairman, Direc	I, an Incorporator must sign.
II DIRECTORS OF OTHER	cols have not occur selector	a, an incorporator max organ
	Partnership or Limited	Liability Partnership:
Signature of one Go	eneral Partner.	
nero (1 T · ). I	D. A. C.	I takilian I imila d Domanombin.
Signatures of ALL	Ceneral Partners	Liability Limited Partnership:
Signatures of ALLI	Cicherat Farthers.	
All others:		
Signature of an auth	norized person.	
r		
Fees:		
Articles of	Conversion:	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:



# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
FITNESS BY D-ZYNE, LLC		
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
2555 PGA BLVD LOT 350	2555 PGA BLVD LOT 350	
PALM BEACH GARDENS, FL 33410	PALM BEACH GARDENS, F	1. 33410
business entity with an active Florida registration.)  The name and the Florida street address of the re  TRACY DANIELLO	egistered agent are:	
Name		
2555 PGA BLVD LOT 350		
Florida street address (P.O.	Box NOT acceptable)	
PALM BEACH GARDENS	FL 33410	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete paccept the obligations of my position as regional acceptance.	this certificate, I hereby acce ty. I further agree to comply erformance of my duties, and	ept the appointment as with the provisions of all l I am familiar with and
Lamer	/protupro	IAI
Registered Agent's Signature (CONTINE		FIL 18 JUN 21 ECRETARY C

ΛF	?TI	CI	.F	IV-

. . . . . .

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

Name and Address:				
TRACY DANIELLO				
Acc.				
	-1			
in -<				
	רו			
5 S	<u></u>			
DRII: 4				
<u> </u>				
_	TRACY DANIELLO 2555 PGA BLVD LOT 350 PALM BEACH GARDENS, FL 33410  TAULAHASSEE, FLORID			

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

TRACY DANIELLO

Typed or printed name of signee

# 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)