# 11820190675

(F	Requestor's Name)
<del></del> <del></del>	Address)
· (/	Address)
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PICK-UP	WAIT MAIL
(I	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only

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#### **COVER LETTER**

<b>TO:</b> New Filing S Division of C				
CALONI	COLOR BAR II, LLC			
SUBJECT: SALON		sulting Florida Limited Con	npany)	_
		les of Organization, an ability Company" in a		
Please return all corr	espondence concernin	g this matter to:		
LISET DUCLUT				
	(Contact Person)		i.	
SALON COLOR BAR I	I, LLC			18 18
	(Firm/Company)	··· • · · · · · · · · · · · · · · · · ·		過品工
300 BEACH DRIVE NE	E, SUITE 121			製って
	(Address)			PH 2:
ST. PETERSBURG, FL	33701			
	City, State and Zip Code)			
lisy726@hotmail.com	erry, state and zip code;			
	oe used for future annual re	port notifications)		
, in the second		•		
For further informati	on concerning this ma	tter, please can:	_	
LISET DUCLUT		_at ( <u>797</u> )_8	51-4933	_
(Name of Conta	act Person)	(Area Code) (Day	rtime Telephone Number)	<del></del>
	for the following amou a bank located in the	int: (All checks process United States)	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 Fees and Certified Copy	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES	S:	MAILING A	ADDRESS:	
New Filing Section		New Filing S		
Division of Corporat	ions	Division of C	•	
Clifton Building		P. O. Box 633	27	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

P18000084604

## 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 of Other Business Entity)
2. The "Other B	usiness Entity" is a
(Enter	r entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, f	Florida  (Enter state, or if a non-U.S. entity, the name of the country)
10-08-2018 on	
(date of organiza	ation, formation or incorporation)
	he Florida Limited Liability Company as set forth in the attached Articles of Organization:
SALON COLOR B.	AR II, LLC
	(Enter Name of Florida Limited Liability Company)
4. If not effective	e on the date of filing, enter the effective date:
(The effective dathe date this doc Note: If the date ins	e on the date of filing, enter the effective date:  Ate: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after cument is filed by the Florida Department of State.)  Better in this block does not meet the applicable statutory filing requirements, this date will not be listed as the edate on the Department of State's records.
(The effective dathe date this document's effective	ate: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after cument is filed by the Florida Department of State.)  Serted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this / day of Jucan he	<u>∠</u> 20 <u>18</u>	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative:		
Printed Name: LISET DUCLUT	Title: MGR	-
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
Signature: Printed Name: LISET DUGLUT	Title: President	- -
Signature:	Title: Vice President	-
Signature:	<del> </del>	_
Printed Name: LARRY ALLEN KIMMITT, JR.		- -
Signature:Printed Name:	Title:	• -
Signature: Printed Name:	Title	-
Signature:Printed Name:	Title:	- •
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		
If Directors or Officers have not been selected, an Inc		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	18 DE SECRE
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	DEC 17 AHASSE
All others: Signature of an authorized person.		RH 2:46
Fees:		<i>₹</i> ~ <b>⇔</b>
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

ARTICLE I - Name: The name of the Limited Liability Company is:			
SALON COLOR	BAR II, LLC		
(Must contain the words "Limited Liability	- · · · · · · · · · · · · · · · · · · ·		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:		
300 BEACH DRIVE NE	300 BEACH DRIVE NE		
SUITE 121	SUITE 121		
SAINT PETERSBURG, FL 33701	SAINT PETERSBURG, FL 33701		
The name and the Florida street address of the relationship LISET DUC	CLUT		
300 BEACH DRIVE N	E. SUITE 121		
Florida street address (P.O.			
SAINT PETERSBURG	FL 33701		
City	Zip		
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	35 A D		

#### **ARTICLE IV-**

as provided for in s.817.155, F.S.

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	. 101794 1514 07 - 109	
MGR	LISET DUCLUT	
	300 BEACH DRIVE NE, SUITE 121	
	SAINT PETERSBURG, FL 33701	
MGR	HAYLEY AGERSKOV	
	4813 97TH WAY NORTH	
	SAINT PETERSBURG, FL 33708	
<del></del>		
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	SECRET	
	PAR CO	
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(Use attachment if necessary)	7 <sub>0</sub> .	
(Ose attachment if necessary)		
	57	
LE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
	Nation 1100	
	an authorized representative of a member	

LISET DUCLUT

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)

any false information submitted in a document to the Department of State constitutes a third degree felony