L19000042833

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





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FILED
2019 JAN 28 PH 4: 47
8ECRETARY OF STATE

(CB | 9 2019 K Brumbley

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: USS BAKE	cry LLC
(Name of Res	sulting Florida Limited Company)
	eles of Organization, and fees are submitted to convert an "Other iability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:
Gertha Andre (Contact Person)	
(Contact Person)	
(Firm/Company)	
7108 South Military T	TrL. Ste 4
Lake Worth PC - 33U63 (City, State and Zip Code)	
(City, State and Zip Code)	
E-mail Address: (to be used for future annual re	<u>v</u>
E-mail Address': (to be used for future annual re	port notifications)
For further information concerning this ma	tter, please call:
Francis Sephir	_at (561) _ 575- 2851 (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the	unt: (All checks processed by this office must be payable in US United States)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$2\$\$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 ADDRESS:	MAILING ADDRESS:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations P. O. Box 6327
Clifton Building 2661 Executive Center Circle	Tallahassee, FL 32314

Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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:
<u>655 Bakery Inc</u> P15-69878
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a 655 Eavery LIC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First arganized formed as incorporated under the laws of Florida
First organized, formed or incorporated under the laws of Florida. (Enter state, or if a non-U.S. entity, the name of the country)
on 08/17/2015 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
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.

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SECRETARY OF STATE
TALLAHAS SEE, FI OBIO.

Signed this 24 day of January			
Signature of Authorized Representative of	I Limited Lia	bility Con	npany:
Signature of Authorized Representative:	the	\sim	
Signature of Authorized Representative: Printed Name:	Title:	- T	manager.
, '			\bigcirc
Signature(s) on behalf of Other Business En	ntify: See bek	ow for req	uired signature
Signature:	ph		
Signature: Jayan F	Title:	Pr	esident
Signature:	Ann Day	\supset	
Printed Name: Sertou Andr	Title:	m	anager
i ,			
Signature: Francis Sephil	$\sqrt{}$		
Printed Name: Francis Sephil	<u>(</u>	<u>r</u>	nancger
Signature:			
Printed Name:	Title:		
•			<u>-</u>
Signature: Printed Name:			
rimicu Nanc.	i iue:	··	
Signature:			
Signature:Printed Name:			
Printed Name:		· · · · · · · · · · · · · · · · · · ·	
Printed Name: If Florida Corporation:	Title:		
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Direct	Title:		
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected	Title: tor, or Officer. I, an Incorporate	or must sig	
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited.	Title: tor, or Officer. I, an Incorporate	or must sig	
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected	Title: tor, or Officer. I, an Incorporate	or must sig	
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited Signature of one General Partner. If Florida Limited Partnership or Limited.	Title: tor, or Officer. I, an Incorporate Liability Parts	or must sig <u>ership:</u>	gn.
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited Signature of one General Partner. If Florida Limited Partnership or Limited.	Title: tor, or Officer. I, an Incorporate Liability Parts	or must sig <u>ership:</u>	gn.
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited. Signature of one General Partner. If Florida Limited Partnership or Limited. Signatures of ALL General Partners.	Title: tor, or Officer. I, an Incorporate Liability Parts	or must sig <u>ership:</u>	gn.
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited Signature of one General Partner. If Florida Limited Partnership or Limited Signatures of ALL General Partners. All others:	Title: tor, or Officer. I, an Incorporate Liability Parts	or must sig <u>ership:</u>	gn.
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited Signature of one General Partner. If Florida Limited Partnership or Limited Signatures of ALL General Partners. All others:	Title: tor, or Officer. I, an Incorporate Liability Parts	or must sig <u>ership:</u>	gn.
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited. Signature of one General Partner. If Florida Limited Partnership or Limited. Signatures of ALL General Partners. All others: Signature of an authorized person.	Title: tor, or Officer. I, an Incorporate Liability Parts	or must sig <u>ership:</u>	gn.
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited. Signature of one General Partner. If Florida Limited Partnership or Limited. Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	Title: tor, or Officer. I, an Incorporate Liability Parte Liability Limit	or must sig ership: ed Partne	gn.
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited. Signature of one General Partner. If Florida Limited Partnership or Limited. Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion:	Title: tor, or Officer. I, an Incorporate Liability Partn Liability Limit \$25.0	or must sig	gn.
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected. If Florida General Partnership or Limited. Signature of one General Partner. If Florida Limited Partnership or Limited. Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	Title: tor, or Officer. i, an Incorporate Liability Parte Liability Limit \$25.00 ation: \$125.00	or must sig	gn. e rship:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
(Must contain the words "Limited Elability	<u> </u>			
(Must contain the words "Limited Etability	y Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:			
7108 South Military Trail Ste 4: Lake worth Fe 33463	508 South Military Trail Suite 4 Lake worth Fe. 33463			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)				
The name and the Florida street address of the r	egistered agent are:			
<u>Gayana Ar</u> Name	ndre			
Name				
7108 South M	hilitary Trail Sk 4.			
Florida street address (P.O				
Lake worth flond	In FL 33463			
City	2ip			
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity I further agree to comply with the provisions of all performance of my duties, and I am familiar with and existered agent as provided for in Chapter 605, F.S			

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager Gayanh AMre - MGR	7108 S. Military TRL			
Gertha Andre - MGR	Tion S. Military Trl			
Francis Sephir - M GR	Lake worth FC: 33463 7108 S Military TRI			
	Lavo worth Fet 33463			
(Use attachment if necessary)				
TICLE V: Other provisions, if any.				
REQUIRED SIGNATURE:	.//			
Za ja jort	Landra			

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)