# L19000 110501

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(Document Number)
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## ÇOVER LETTER

TO: New Filing Division of	Section Corporations			
SUBJECT: CRISTI	NA'S BEAUTY SALON II	. LLC		
		sulting Florida Limi	ted Cor	mpany)
The enclosed Articl Business Entity" in	es of Conversion, Artic to a "Florida Limited L	cles of Organizati liability Company	on, ar ''' in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all cor	respondence concernir	ng this matter to:		
GUILLERMO A HENI	RIQUEZ			
	(Contact Person)		-	
CRISTINA'S BEAUTY	' SALON II, LLC			
	(Firm/Company)			
18199 NE 19TH AVEN	NUE			
	(Address)			
MIAMI, FL 33162				
	(City. State and Zip Code)	<del></del>		
amigosfs@comcast.net				
E-mail Address: (to	be used for future annual re	port notifications)		
For further informat	ion concerning this ma	tter, please call:		
GUILLERMO A HENF	RIQUEZ	at (305	1290-9	875
(Name of Cont	act Person)	(Area Code)	(Day	875
Enclosed is a check dollars and drawn or	for the following amount a bank located in the	int: (All checks p United States)	rocess	sed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	■\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES  New Filing Section  Division of Corpora		New Fi	ling S	ADDRESS: ection orporations

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

#### **Articles of Conversion**

For

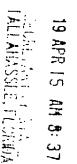
#### "Other Business Entity"

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: CRISTINA'S BEAUTY SALON II CORP
(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 FLORIDA (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on
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: CRISTINA'S BEAUTY SALON II, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
( I he 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 4	day of <u>APRIL</u>	20_19
Signature of Author	orized Representative of	Limited Liability Company:
Signature of Author	ized Representative: X	SAF
Printed Name: GUILL	ERMO A HENRIQUEZ	Title: AMBR
Signature(s) on beh	alf of Other Business En	tity: [See below for required signature(s
Signature: \Signature	)	
Printed Name: GUILL	ERMO A HENRIQUEZ	Title: PRESIDENT
Signature		
Printed Name:		Title:
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Printed Name:		Title:
If Florida Corporat Signature of Chairma	<u>ion:</u> m. Vice Chairman. Directe	
	Partnership or Limited L eral Partner.	
If Florida Limited P Signatures of ALL G		iability Limited Partnership:
All others: Signature of an autho	rized person.	

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

Fees:

\$30.00 (Optional)

\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nat The name of the L	<b>me:</b> imited Liability Comp	pany is:
CRISTINA'S BEAUT	<del>_</del>	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Ad The mailing addres		f the principal office of the Limited Liability Company is:
Principal Office A	Address:	Mailing Address:
18199 NE 19TH AVE MIAMI, FL 33162	NUE	MIAMI, FL 33162
(The Limited Liability Co- business entity with an a	ompany cannot serve as its ov active Florida registration.)	istered Office, & Registered Agent's Signature:  on Registered Agent. You must designate an individual or another  of the registered agent are:  QUEZ  Name
	18199 NE 19TH AVENU	
		ss (P.O. Box NOT acceptable)
	МІАМІ	FL 33162
liability compo registered agent o statutes relating	any at the place design and agree to act in this to the proper and con	Zip  I and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all aplete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S

(CONTINUED)

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#### ARTICLE IV-

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	
AMBR	GUILLERMO A HENRIQUEZ
	1008 BANYAN DRIVE
	HOLLYWOOD, FL 33021
11 mp	
AMBR	STEPHANY HENRIQUEZ PERALTA
	1008 BANYAN DRIVE
	HOLLYWOOD, FL 33021
	<del></del>
(Use attachment if necessary)	
(one unusument it necessary)	
<b>FICLE V:</b> Other provisions, if any.	
<del></del>	
REQUIRED SIGNATURE:	
, C10	
X JAM	

GUILLERMO A HENRIQUEZ

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

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)

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

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