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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	rsiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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C RICO JUN 12 2019 JIVISION OF CORPORATIONS

COVER LETTER

	Filing Selion of Co	ction rporations				
		MARKET LLC.				
SUBJECT:			ulting Florida Limited Com	npany)		
Business Ent	ity" into	a "Florida Limited Li	ability Company" in ac	d fees are submitted to con- ecordance with s. 605.1045		
Please return	all corre	spondence concerning	this matter to:			
	L	ORENA ANDRADE				
		(Contact Person)				
	В	IOBABY MARKET LLC				<u>=</u> ;
		(Firm/Company)			9	NEW SEA
	70		0		, Right	오됨
	7.5	O1 4TH ST. N, STE 400 (Address)			212	육
		(71401033)			**	CRETARY OF STATE TON OF CORPORATIONS
		Petersburg, FL 33702				윉
	(C	ity, State and Zip Code)			£: 5	<u> </u>
		@BIOBABYMARKET.C			မ	- 54 - 54
E-mail Add	ress: (to be	used for future annual re	port notifications)			
For further in	nformatic	n concerning this ma	tter, please call:			
LOF	ENA AND	RADE	_at (<u>850</u>) 80)74500.		
(Name	e of Contac	et Person)	(Area Code) (Day	rtime Telephone Number)		
		or the following amou a bank located in the		sed by this office must be p	ayable in US	
\$150.00 Fili (\$25 for Conve & \$125 for Arti of Organization	rsion icles	□\$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 All New Filing S Division of C Clifton Build 2661 Execut	Section Corporati ling	ons	MAILING A New Filing S Division of C P. O. Box 63 Tallahassec,	ection Corporations 27		

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:
BIOBABY MARKET LLC. (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws ofWYOMING
(Enter state, or if a non-U.S. entity, the name of the country)
on 03/13/2019 .
on 03/13/2019 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BIOBABY MARKET LLC.
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
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 <u>26TH</u> day of <u>JUNE</u>	20 <u>19</u> .
Signature of Authorized Representative of Limite	-
Signature of Authorized Representative: DREM Printed Name: LORENA ANDRADE	MANDENSEM Title: AMBR
Signature(s) on behalf of Other Business Entity: [S	ee below for required signature(s)
Signature: WENA MANGELE M	
Printed Name: LORENA ANDRADE	Title: MGR
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or O If Directors or Officers have not been selected, an Inco If Florida General Partnership or Limited Liability	fficer. orporator must sign.
Signature of one General Partner. If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Fees for Florida Articles of Organization: Certified Copy:	\$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:				
BIOBABY MA	RKET LLC.			
(Must contain the words "Limited Liabilit	y Company, "	L.L.C.," or "LLC.")		
ARTICLE II - Address:				
The mailing address and street address of the pr	rincipal off	ice of the Limited Lia	ability Company is	:
Principal Office Address:	Mailing	Address:		
7901 4TH ST N, STE 4000	7	901 4TH ST N, STE 40	00	
St. Petersburg, FL 33702		t. Petersburg, FL 3370		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)			dual or another	<u>}::</u>
The name and the Florida street address of the	registered a	agent are:	19 HUE	NOISI SECKI
REGISTERED	AGENTS II	NC	12	유로도
Nam	е		78 7E	6559 450 7331
7901 4TH S	ST N, STE 3	00	₹.	물살
Florida street address (P.C). Box <u>NO</u>	$\underline{\Gamma}$ acceptable)	53	
St. Petersburg	F <u>L</u>	33702		
City		Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

l'itle:	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	
AMBR	LORENA ANDRADE
	7901 4TH ST N, STE 4000
	St. Petersburg, FL 33702
MGR	LORENA ANDRADE
	7901 4TH ST N, STE 4000
	St. Petersburg, FL 33702
(Use attachment if necessary)	
LE V: Other provisions, if any.	
	
REQUIRED SIGNATURE:	
liken	A W-MODDE: M

ARTICLE IV-

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)