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Office Use Only

COVERLETTER W2000082032 TO: New Filing Section Division of Corporations SUBJECT: <u>Royal Image Studio LLC</u> (Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Michaela (Firm/Company) SW 15th St apt 108 (Address) City. State and Zip Code) Udiolecogmail.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Michgela Coqts at (305) 791-3416 (Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

S150.00 Filing Fees (S25 for Conversion & S125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	S180.00 Filing Fees and Certified Copy	S185.00 Filing Fees, Certified Copy, and Certificate of Status		8- 111
Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, H	ection orporations 7	New Divis The C 2415	<u>t Address:</u> Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suit hassee, FL 32303	: " te 810	PH 2: 59

<u>Articles of Conversion</u> For <u>"Other Business Entity"</u> 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:
<u>Reval Image Studio Inc</u> (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Corporation</u> (P1500010028)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of $\underline{F[0r]dq}$ (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, of it a non-0.5, entity, the name of the country)
on <u>Teb. 1, 2015</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization :
(EnterName 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: <u>July 5, 202.0</u> . (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.) <u>Note:</u> 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.

61 :01 Hr 22 A.M.C.

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Signed this <u>5</u> day of <u>July</u>	20 <u>20</u> .			
Signature of Authorized Representative of Limited Liability Company:				
	*			
Signature of Authorized-Representative:	Title: <u>tuthonzed</u> member			
Signature(s) on behalf of Other Business Entity: [S	ee below for required signature(s)}			
Signature:				
Signature:	Title: dacer /			
man 1				
Signature: Manhala Coak	Title: Contractor			
Signature: Printed Name:				
Printed Name:				
Signature:				
Printed Name:	Title:			
Signature:	Title			
Printed Name:				
Signature:				
Printed Name:	_ Title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C	fficer			
If Directors or Officers have not been selected, an Inco	orporator must sign.			
If Florida General Partnership or Limited Liability	<u>Partnership:</u>			
Signature of one General Partner.				
Re Elevisted Limited Doutnowship or Limited Liphility	Limited Partnershin:			
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.				
Signatures of ADD General Fundions.				
<u>All others:</u> Signature of an authorized person.				
Fees:				
Articles of Conversion:	\$25.00 \$125.00			
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Optional)			
Certified Copy: Certificate of Status:	\$5.00 (Optional)			
Connear or Status.	`			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Roval	Image Studio U.C.
(Must contain	the words Wimited Liability 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:

Mailing Address: Principal Office Address: SW 15th St 10960 SW 15th St)nit 108 Pembroke tines. FL 33025 PIDES FL embrok-

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:



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.,

stered Agent's Signature (REQUIRED)

(CONTINUED)

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 <u>AMBR</u>	James Saintilien 10940 SW 15th St Unt 108 Pembroke Pines, FL 33025
(Use attachment if necessary)	

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE: 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. 1 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. SAINTICIEN Typed or printed name of signee AMES Filing Fees \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)