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(Requestor's Name)
(Address)
(6.11)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Charles of Falls Mary)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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C RICO AUG 24 2020

COVER LETTER

TO:	New Filing ! Division of	Section Corporations			
SUB.	JECT: Wonde	·			
			sulting Florida Li	mited Co	ompany)
The e Busin	nclosed Articleses Entity" int	es of Conversion, Arti o a "Florida Limited L	cles of Organiz Liability Compa	ation, a my" in	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	e return all cor	respondence concernir	ng this matter to	o:	
Shaur	n Moynihan				
		(Contact Person)			
Wond	lerMoms LLC				
		(Firm/Company)			
204 4	th Ave #34				
		(Address)			
Indian	Rocks Beach, I	FL 33785			
	(City, State and Zip Code)			
wonde	ermomsrus@gm	ail.com			
E-n	nail Address: (to b	oe used for future annual re	port notifications)		
For fu	rther informati	on concerning this ma	tter, please call	l:	
Shaun	Moynihan		_at (<u>916</u>	J	8576
	(Name of Conta	act Person)	(Area Cod	c) (Day	ytime Telephone Number)
Enclos dollars	sed is a check to s and drawn on	or the following amou a bank located in the	int: (All checks United States)	proces	sed by this office must be payable in US
\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filir and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Addi New Filing So Division of C	ection orporations		New	t Address: Filing Section ion of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

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 WonderMoms LLC	Entity" immediately prior to the filing of the Articles of Conversion is:
	Name of Other Business Entity)
2. The "Other Business Entity" is a	corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporat	ad undo-4k-1 California
on 01/31/2019 (date of organization, formation or incor	(Enter state, or if a non-U.S. entity, the name of the country)
3. The name of the Florida Limited L WonderMoms LLC	Liability Company as set forth in the attached Articles of Organization:
(Enter Name of	Florida Limited Liability Company)
	r to date of receipt or filed date nor more than 90 calendar days after le Florida Department of State.)
5. The plan of conversion has been ap	proved 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 19th day of August	20
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative:	-
Signature of Authorized Representative: Printed Name: Shaun Moynihan	Title: Owner
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: Shaun Moynihan	
Printed Name: Shaun Movemen	Title: Owner
Timed Name. Onder Weynman	Title: Owner
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	I itle:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	iter Donamanakia.
Signature of one General Partner.	tty raithership:
<u> </u>	
<u>lf Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
S.B. Livie of all dathornica person.	
Fees:	
Aminton as C	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Ontional)
Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Commodic of Status.	ου (Opnonar)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Comp	any is:	
WonderMoms LLC		
(Must contain the words "Limited	Liability Company, "L.L.C.," or "L.L.C.,")	
ARTICLE II - Address:		
	f the principal office of the Limited Liability Co	omnany is:
Principal Office Address:	Mailing Address:	
204 4th Ave #34	204 4th Ave #34	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
ARTICLE III - Registered Agent, Regi	Indian Rocks Beach, FL 33785 stered Office, & Registered Agent's Signature	Pot
ARTICLE III - Registered Agent, Regi	Indian Rocks Beach, FL 33785 istered Office, & Registered Agent's Signatural Registered Agent. You must designate an individual or another.	her
ARTICLE III - Registered Agent, Regi	istered Office, & Registered Agent's Signatu In Registered Agent. You must designate an individual or anoth	her
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Agent's Signatu on Registered Agent. You must designate an individual or anoth of the registered agent are:	her 29 5 7 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	istered Office, & Registered Agent's Signatu In Registered Agent. You must designate an individual or anoth	//i//a// //i//
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	istered Office, & Registered Agent's Signaturn Registered Agent. You must designate an individual or another the registered agent are: Name	/ikiyeiv //%;
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of Shaun Moynihan 19915 gulf blvd, unit 80	istered Office, & Registered Agent's Signaturn Registered Agent. You must designate an individual or another the registered agent are: Name	//i//a// //i//
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of Shaun Moynihan 19915 gulf blvd, unit 80	istered Office, & Registered Agent's Signaturn Registered Agent. You must designate an individual or another the registered agent are: Name	her 29 5 7 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6

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)

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

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Chaua Maunikaa
Watt	Shaun Moynihan
	19915 gulf blvd, unit 806 indian shores, FL, 33785
	midian shores, FL, 33785
	
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(Use attachment if necessary)	
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LE V: Other provisions, if any.	
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(Use attachment if necessary) LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or a	n authorized representative of a mombar
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance we	n authorized representative of a member with section 605.0203 (1) (b). Florida Statutes Lam aware the
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance we	Ath section 685 8383 (1) /LV 121
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S. Shaun Moynihan	of this section 605.0203 (1) (b), Florida Statutes. I am aware the the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S. Shaun Moynihan	Ath section 685 8383 (1) /LV 121

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)