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(Re	questor's Name)	
(Ad	dress)	
hA)	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Document Number)		
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Clean 2 Perfection Service	es LLC
	sulting Florida Limited Company)
	les of Organization, and fees are submitted to convert an "Other ability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:
Celon Stokes	
(Contact Person)	
Clean 2 Perfection Services LLC	
(Firm/Company)	
1701 NW 6th Ct Ste 1-102	
(Address)	
Fort Lauderdale, FL 33311	
(City, State and Zip Code)	
stokescelon@gmail.com	
E-mail Address: (to be used for future annual re	port notifications)
For further information concerning this ma	tter, please call:
CelonStokes	at (954) 849-8896
(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) \$155.00 Filing Fees and Certificate of Status	and Certified Copy Certificate of Status
	(f. • • .
Mailing Address: New Filing Section	Street Address: New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 co
	Tallahassee, FL 32303

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: Clean 2 Perfection Services 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 ofFlorida
(Enter state, or if a non-U.S. entity, the name of the country)
on 03/05/2016 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Clean 2 Perfection Services LLC
(Enter Name of Florida Limited Liability Company)
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

Signed this 5th day of September	_ 2020
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Celon Stokes	Title: Manager
Signature(s) on behalf of Other Business Entity:	
Signature: Clon Stokes	
Printed Name: Celon Stokes	Title: President
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Title
Trined Name.	
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 Inc	
If Florida General Partnership or Limited Liabili	tv Partnershin
Signature of one General Partner.	y Lucionp.
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
MGR	Celon Stokes		
	1701 NW 6th Ct, #1-102		
	Fort Lauderdale, FL 33311		
Use attachment if necessary)			
EV OIL 11 16			
LE V: Other provisions, if any.			
REQUIRED SIGNATURE:			

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

Celon Stokes

Typed or printed name of signee

Filing Fees

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited Liability Compa	ny is:				
Clean Perfection Services LL (Must contain the words "Limited	C			_	
(with contain the words - Limited	Liability Company,	"L.L.C.," or "LLC,")			
ARTICLE II - Address: The mailing address and street address of	the principal of	fice of the Limite	ed Liability (Compa	ny is:
Principal Office Address:	Mailing	Address:			
1701 NW 6th Ct, #1-102	1701 8	IW 6th Ct, #1-102			
Fort Lauderdale, FL 33311		auderdale, FL 33311	1	- -	
				_	
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	Registered Agent. \	ou must designate an	ent's Signat individual or and	ure: other	
The name and the Florida street address of	the registered	agent are:			
Celon Stokes					
i	Name				
1701 NW 6th C	t. #1-102				
Florida street address		Γ acceptable)			
		_ ' '			
Fort Lauderdale	e FL	33311			
City		Zip			
Having been named as registered agent of liability company at the place designal registered agent and agree to act in this constatutes relating to the proper and compaccept the obligations of my position of the proper and compaccept the obligations of my position of the proper and constant accept the obligations of my position of the proper and constant accept the obligations of the proper accept the obligations of the place accept the proper accept the obligations of the place accept the place accept the place accept the obligations of the place accept the place accep	ted in this certifi apacity. I furth plete performanc	icate, I hereby act er agree to compl ee of my duties, al	cept the appo ly with the pr nd I am famil	ointmer ovisior liar wit	it as is of al h and
Registered Agent's	Signature (RE	QUIRED)	٠,,	2020 SEL	₹ °
(CON	TINUED)			5	
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