12100/02653

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

3/12/21



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FALL ABASSI STEERING

2021 JAN 20 PH 1:3

COVER LETTER

Division of O	Corporations					
SUBJECT: Styled b	y Christen, LLC					
		sulting	g Florida Limi	ted Co	mpany)	
	-		_		nd fees are submitted to conve accordance with s. 605.1045, I	
Please return all corr	respondence concerning	g thi	s matter to:			
David A. Eastman						
	(Contact Person)			-		
The Eastman Law Firr	n, P.C.					
	(Firm/Company)			-		
881 Piedmont Avenue	NE					
	(Address)	•		•		
Atlanta, GA 30309						
(City, State and Zip Code)			•		
david@eastmanlaw.co	om					
E-mail Address: (to b	e used for future annual re	port n	otifications)	•		
For further informati	on concerning this ma	tter,	please call:			
David A. Eastman		at (404	_\ 477-	2600	
(Name of Conta	act Person)	\	(Area Code)	(Da	2600 ytime Telephone Number)	
	for the following amou			roces	sed by this office must be pay	able in US
S 150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status		180.00 Filing Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add	ress:			Stree	t Address:	
New Filing S					Filing Section	
Division of C P.O. Box 632					ion of Corporations Centre of Tallahassee	
Tallahassee, I					N. Monroe Street, Suite 810	€ .
,					hassee, FL 32303	

INHS11 (7/17)

TO: New Filing Section

Articles of Conversion

For

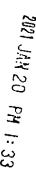
"Other Business Entity"

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:
Styled by Christen, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
Marc h 12, 2020 on
On
Styled by Christen, 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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.



Signed this 1st day of January	20 21 .
Signature of Authorized Representative of Lim	1
Signature of Authorized Representative of Line	ted Diabatty Company.
Signature of Authorized Representative: Christ	a Schul
Printed Name: Christen Schmidt	Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Del A Sorte	
Printed Name: David A. Eastman	Title: Authorized Person
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
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	
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
	· •

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	any is:	
Styled by Christen, LLC	d Liability Company, "L.L.C.," or "LL	C 'm
(Must contain the words Limited	a Liability Company, L.L.C., or EL	.c.)
ARTICLE II - Address:		
The mailing address and street address o	f the principal office of the L	imited Liability Company is:
•		
Principal Office Address:	Mailing Address:	
132 Grace Point Way		
Inlet Beach, FL 32461		
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.) The name and the Florida street address of Paracorp Incorporated	vn Registered Agent. You must design	d Agent's Signature: ate an individual or another
155 Office Plaza Drive,	1st Floor	
Florida street addres	s (P.O. Box <u>NOT</u> acceptable	e)
Tallahassee	FL ³²³⁰¹	
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)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Christen Schmidt
	132 Grace Point Way Inlet Beach, FL 32461
	miet Beach, FC 32401
	
Use attachment if necessary)	
LE V: Other provisions, if any. pany shall be managed by one or more	Managers.
	Managers.
pany shall be managed by one or more	Managers.
pany shall be managed by one or more	Managers.
pany shall be managed by one or more	Managers.
pany shall be managed by one or more	Managers.
Signature of a member or a	Managers. an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Signature of a member or a This document is executed in accordance any false information submitted in a document	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. David A. Eastman, Authorized Repres	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony sentative ped or printed name of signee
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Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. David A. Eastman, Authorized Repress Typ	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony sentative ped or printed name of signee Filing Fees f Organization and Designation of Registered Agent

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

ARTICLE IV-