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	Address)
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PICK-UP	☐ WAIT ☐ MAIL
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(Business Entity Name)
	Document Number)
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Conversion

FILED 2022 DCT 25 MH II: 50

A. RAMSEY

J. L 6 2022

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

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DATE:

10/25/22

NAME: ARMAR WELLNESS, LLC

TYPE OF FILING: CONVERSION

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:	Registration S Division of C			
SUBJ	JECT: Armar We	illness, LLC		
			Limited Liability Compan	у
Limite			ee(s) are submitted to c r Business Entity" in a	
Please	e return all corre	espondence concernin	g this matter to:	
Jake Fl	leischer			
		Contact Person	-	
Magic	City Title			
		Firm/Company		
888 E	Las olas blvd. Suit	e 502	_	
		Address		
Fort La	auderdale, Florida	33301		
	C	ity, State and Zip Code		
Closing	gs@magictitle.con	n		
		be used for future annual r	report notification)	
For fu	irther information	on concerning this ma	tter, please call:	
Jake Fleischer		at (305) 5140	0622	
N	Name of Contact Person		Area Code and Daytime Telephone Number	
Enclo	sed is a check f	or the following amou	int:	
■ \$25	5.00 Filing Fee	\$30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

CR2E106 (05/17)

FILED

Articles of Conversion

For

2022 OCT 25 AM II: 50

Florida Limited Liability Company

Into

"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:						
Armar Wellness, LLC						
Enter Name of Florida Limited Liability Company						
2. The name of the "Converted or Other Business Entity" is:						
Armar Wellness, LLC						
Enter Name of "Converted or Other Business Entity"						
3. The "Converted or Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)						
organized, formed or incorporated under the laws of						
(Enter state, or if a non-U.S. entity, the name of the country). The formation document is attached (if applicable).						
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.						
5. This conversion shall be effective in Florida on: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date of the conversion under the laws governing the Other Business Entity.")						

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.

- . 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
 - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address:		888 E las olas blvd. Suite 50	2		
Mailing Address:		Fort Lauderdale, FL 33301 888 E. Las olas blvd. Suite 502			
		appr		Other Business Entity" I amount to which such in 1072, F.S.	
Signed	this	day of		20 ²²	
Signatu	ire:	Must be signed by a Me	mber or Authorized Represer	ntative	
Printed		BermanT	Authorized Representitle:	native	
	Filing Fee: Certified Copy Certificate of S		•		

Page 2 of 2