# 121000 333300

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W210000 45228

Office Use Only



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TALL SHARESTE PROPERTY.



### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 5, 2021

WILLIAM EAST 2630 W BROWARD BLVD PMB 757 FT LAUDERDALE, FL 33351

SUBJECT: INSIDE MY SHOEBOXX LLC

Ref. Number: W21000045228



We have received your document for INSIDE MY SHOEBOXX LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Matthew T Moon Regulatory Specialist II Supervisor Letter Number: 921A00007002

### **COVER LETTER**

Division of Corporations				
SUBJECT: Inside My Shoe (Name of Re	.boxx		<del></del>	
(Name of Re	sulting Florida Limited Cor	npany)		
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	<b>-</b>			Other
Please return all correspondence concernir	ng this matter to:			
William East (Contact Person)			2021	
(Contact Person)			·	•
(Firm/Company)			<u></u>	
2630 W Broward Blud PM	18757		3	
(Address)			1.73 1.73 1.74	
Ft Lauderdale, FL 33351 (City, State and Zip Code)	<u> </u>			
IMSB954@yahoo.com			5° 22	
E-mail Address: (to be used for future annual re	eport notifications)		<b>921</b>	
For further information concerning this ma	atter, please call:  at (954) 2  (Area Code) (Day		JUL 19	in the second se
William East	at (954 ) 2	28-0995	70	iγ
(Name of Contact Person)	(Area Code) (Day	ytime Telephone Number	r)	-
Enclosed is a check for the following amordollars and drawn on a bank located in the	unt: (All checks process	sed by this office mu	ist be payable in	US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	©\$185.00 Filing Fees Certified Copy, and Certificate of Status	5,	
Mailing Address:		t Address:		
New Filing Section		Filing Section		
Division of Corporations P.O. Box 6327		ion of Corporations Centre of Tallahassee	;	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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.

Inside My Shorboxx (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 of Florida (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on 7/15/2021 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Inside My Shoeboxx LLC (Enter Name 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: 7/15/2021.
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days afte
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 amour which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

P1100019196



Signed this 15 day of July	20 Q.\
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	Title: President
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: W. Wan East	Title: President
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	Officer.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
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)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Inside My Shocboxx LL (Must contain the words "Limited Liability	Company, "L.L.C.," or "LL.C.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2630 W Broward Blvd PMB 757 Ft Landerdale, FL 33351	2630 W Broward Brud PMB 757 Ft Landerdale, FU 33351
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re-	egistered agent are:
William East Name	·
Name	
2630 W Broward	
Florida street address (P.O.	· · · · · · · · · · · · · · · · · · ·
Et Laudeldale City	FL 3335 \ Zip
City	Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate. I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and issered agent as provided for in Chapter 605, F.S
Registered Agent's Signa	ature (REOURED)
(CONTINU	MA JUNIA

	DT		F	E 3 /
-	RT	16 1	. M.	IV-

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

William East

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager President	William East 2630 W Broward Blud PMB 757 Ct. Louderdalk, FL 33351
<del></del>	JUL 2888
(Use attachment if necessary)	PM 1: 37
ICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature of a member or a	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware that

Typed or printed name of signee

## Filing Fees

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