LZ/000366010

(Requestor's Name)
(Address)
(
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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J DENNIS

AUG 1 6 2021

COVER LETTER

TO:	New Filing S Division of C				
SHR	LECT, COUNT	RY CREATIONS LLC			
300	<u> </u>	(Name of Res	ulting Florida Lim	ited Con	npany)
The e Busin	enclosed Article ness Entity" into	s of Conversion, Artic o a "Florida Limited Li	les of Organizat ability Compan	ion, an y'' in a	d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concerning	g this matter to:		
JENN	IIFER GOLDFAR	RB			
		(Contact Person)		_	
KEEP	MY BOOKS, IN	C.			
		(Firm/Company)		-	
4900	S UNIVERSITY	DRIVE, SUITE 207 D5			
		(Address)		-	
DAVII	E, FL 33328				
		City, State and Zip Code)	· -	_	
SUPF	ORT@KEEPMY	BOOKS.NET			
	mail Address: (to b	oe used for future annual re	port notifications)	 -	
For fu	urther informati	on concerning this ma	tter, please call:		
JENN	IIFER GOLDFAR	RB	_at (309-	6381
	(Name of Conta	act Person)	(Area Code	(Day	ytime Telephone Number)
		for the following amou a a bank located in the		proces	sed by this office must be payable in US
(\$25 fd & \$12:	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co	_	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee.	ection Corporations 27		New Divis	et Address: Filing Section Filing Se

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: COUNTRY CREATIONS CO
(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.)
(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)
O5/12/2021 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(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 locument'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 20 day of MAY	_20 <u>21</u>
Signature of Authorized Representative of Limit	
	Polohoub *mustsi
Signature(s) on behalf of Other Business Entity: [
Signature: 14L. Printed Name: TYLER JACQUES	THE DESIDENT
Printed Name: MYLER JACQUES	Title: FRESIDENT
Simotory Say Ave	
Signature: STACEY JACQUES	Title: VICE-PRESIDENT
Clanatura	
Signature:Printed Name:	Title:
I I I I I I I I I I I I I I I I I I I	
Signature:	
Signature:Printed Name:	Title:
Signature	
Signature:Printed Name:	Title:
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	ty Partnership:
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.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$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 Company is:	
COUNTRY CREATIONS LLC (Must contain the words "Limited Liability	y Company, "L.L.C.," or "L.L.C.,"
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4400 SW 95TH AVENUE	4400 SW 95TH AVENUE DAVIE, FL 33328
ARTICLE IU - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	including state and the state of the state o
The name and the Florida street address of the	registered agent are:
Stacey Jaco	MS
Florida street address (P.C.	D. Box <u>NOT</u> acceptable)
DAVIE	FL 33328
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)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	THE PARTIES
AMBR	TYLER JACQUES
	4400 SW 95TH AVENUE
	DAVIE, FL 33328
AMBR	STACEY JACQUES
	4400 SW 95TH AVENUE
	DAVIE, FL 33328
(Use attachment if necessary)	
(, ,	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
111	
lylu page	
Signature of a member or :	an authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware the
any talse information submitted in a document as provided for in s.817.155, F.S.	nent to the Department of State constitutes a third degree felo
TYLER JACQUES	
Туг	ped 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)