L21000414420

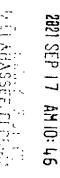
(Requestor's Name)
(Address)
(Address)
(
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(cocument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200373176982

09/17/21--01008--010 **185.00



omies T

COVER LETTER

TO: New Filing Section	
Division of Corporations	1.0
SUBJECT: Body By Keri L	
(Name of Resulting Florida Lim	ited Company)
The enclosed Articles of Conversion, Articles of Organizat Business Entity" into a "Florida Limited Liability Compan	
Please return all correspondence concerning this matter to:	
Keri Luce	_
Keri Luce (Contact Person) Body By Keri (Firm/Company)	_
(Firm/Company)	
7150 Estero BLVD #500 (Address)	_
Ft. Myers Beach FL 33931 (City, State and Zip Code)	_
bodybykeri@gmail.com	_
E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (630 (Area Code	, 484-5888
(Name of Contact Person) (Area Code	(Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks dollars and drawn on a bank located in the United States)	processed by this office must be payable in US
□ \$150.00 Filing Fees (\$25 for Conversion and Certificate of Status of Organization) □ \$155.00 Filing Fees and Certified Co	
Mailing Address:	Street Address:
New Filing Section	New Filing Section Division of Corporations
Division of Corporations P.O. Box 6327	Division of Corporations The 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: 8049 89 Keri LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on 7/26/2019 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Body By Keri 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 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.

12th		•
Signed this 13^{13} day of $5e$	Ptember 2021	
Signature of Authorized Represent	ative of Limited Liability Company:	
Signature of Authorized Representati	ve:Title:	CED DUNER
Printed Name: <u>Ceri Coce</u>	little:	CEO COO TO
Signature(s) on behalf of Other Busi	ness Entity: [See below for required signals are necessarily and the necessarily in the n	gnature(s)]
Signature: Yas Masce	Title:	
Printed Name:	Title:	
Signature:	_	
Printed Name:	Title:	
Signature:		<u></u>
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:	Title:	
Printed Name:	Title:	
Signature:	Title:	
Printed Name:	Title:	
If Florida Corporation:		
Signature of Chairman, Vice Chairman		
If Directors or Officers have not been	selected, an Incorporator must sign.	
lf Florida General Partnership or L	imited Liability Partnership:	
Signature of one General Partner.		
If Florida Limited Partnership or Li Signatures of <u>ALL</u> General Partners.	imited Liability Limited Partnership:	
All others:		
Signature of an authorized person.		
<u>Fees:</u>		

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy: Certificate of Status:

\$30.00 (Optional)

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ā	R	Tl	C	LE	1	-]	١	ame:	
---	---	----	---	----	---	-----	---	------	--

The name of the Limited Liability Company is:

Body By Keri LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 7150 Estero BLUD #500 Ft. Myers Beach FL 33931 Mailing Address: 7150 Estero BLUD #500 Ft. Myers Beach FL 33931 33931

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:	2021	
Keri Luce	21 SE	~~ <u>`</u> ;
Name	P17	******
7150 Esieno BLVD #500	err :	7
Florida street address (P.O. Box NOT acceptable)	AH 10:	C
Ft. Myers Beach FL 33931		
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)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
CEO	Keri Wa 7150 Estelo BLUD #500 Ft Myers Beach FL 33931
	33931
(Use attachment if necessary)	·
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	14. 6

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 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.

Keriluce

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)