L21000470309

(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:

Office Use Only



700374985927

11/02/21--01002--017 **150.00

2021 NOV -2 BUIL

	RPORATE ACCESS,	When you need ACCESS to the world
	P.O. Box 376	236 East 6th Avenue. Tallahassee, Florida 32303 066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666
		WALK IN
	Pl	ICK UP: 11/2 DANNY
	CERTIFIED COPY	
КХ	РНОТОСОРУ	
	CUS	
ХХ	FILING	CONVERSION
	CANDICE STARK C	CREATIONS LLC
_	CANDICE STARK C	
		OCUMENT #)
- (CORPORATE NAME AND DO	OCUMENT #)
- (CORPORATE NAME AND DO	OCUMENT #) OCUMENT #)

1.

2.

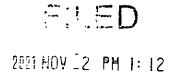
3.

4.

5.

6.

SPECIAL
INSTRUCTIONS:



For "Other Business Entity" Into

RECITED OF STATE

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.

Diatitics.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: CANDICE STARK CREATIONS LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of New Jersey
(Enter state, or if a non-U.S. entity, the name of the country)
on 10/15/2008 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: CANDICE STARK CREATIONS LLC (Enter Name of Florida Limited Liability Company)
(Effect Name of Plotted Elimited Tracinity Company)
4. If not effective on the date of filing, enter the effective date: 10-29-2021
(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 29 day of October	20 21
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:Printed Name: Cancide Stark	Title: Managing Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: Candice Stark	Title: Managing Member
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	
Signature:Printed Name:	ma.
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
<u>If Florida Limited Partnership or Limited Liabili</u> 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

(Must contain the words "Limited Liab ARTICLE II - Address: The mailing address and street address of the		
· · · · · · · · · · · · · · · · · ·		
The mailing address and street address of the		
	principal office of the Limited Lic	ability Company is
Principal Office Address:	Mailing Address:	
2870 Pershing Street	2870 Persning Street	
Hollywood, FL 33020	Hollywood, FL 33020	 -
		 -
The name and the Florida street address of the	registered agent are:	dual or another
Registered Agent Solutions, Inc.		
	ne	
Registered Agent Solutions, Inc. Nar 155 Office Plaza Dr. Su	ne	
Registered Agent Solutions, Inc. Nar 155 Office Plaza Dr. Su	ne lite A	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager Candice Stark AMBR	2870 Pershing Street
	Hollywood, FL 33020
	
	-
(Use attachment if necessary)	
LE V: Other provisions, if any.	
	····
REQUIRED SIGNATURE:	1 , ,
//	VI Au I
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 aw nent to the Department of State constitutes a third degre

Filing Fees
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-