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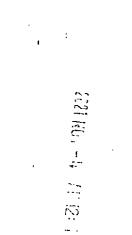
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Certified Copies	Certificate:	s of Status
Special Instructions to Fil	ing Officer:	
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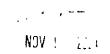
Office Use Only



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11/08/21-01010-008 **150.00





COVER LETTER

TO: New Filing Section Division of Corporation	ns		
SUBJECT:	Porde Calass	Boutique	
3000Ee11	(Name of Resulting Florida I		_
		ization, and fees are submitted to pany" in accordance with s. 605.1	
Please return all correspondence	ce concerning this matter	10:	
Kensha haw	Σ		
Purple Glass	Bout/que		
6331 W. Colen			
Orlando, FT	ress) 32818		
	nd Zip Code) GUE O GNUU, UN Ature annual report notification	ms)	
For further information concer Leni Ja Lau (Name of Contact Person)	s at (40	rall: 7	_
	lowing amount: (All chec	cks processed by this office must b	be payable in US
\$150.00 Filing Fees \$25 for Conversion & \$125 for Articles of Organization)	0 Filing Fees S180.00 Ficate of and Certified		
Mailing Address: New Filing Section Division of Corporation P.O. Box 6327	ns	Street Address: New Filing Section 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 <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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on 6/5/2013 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization Purple Glass Dod'g ve (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: 10/12/21 (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the effective date.
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days aft
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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this day ofNovember	$\frac{1}{20} \frac{21}{20}$
Signature of Authorized Representative of Limit	ed Limbility Company:
Signature of Authorized Representative: Kensha Laws	Title: managing member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Dolgas	m.l.
Printed Name:	_ THIC:
Signature: Desgles Hart	
,	
Printed Name Jessica Taylor	Title: AR
Signature:Printed Name:	
Signature:Printed Name:	_ Title:
Signature:Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> Genéral Partners.	v Limited Partnership:
All others: Signature of an authorized person.	
Fees:	į.
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 I - Name: The name of the Limited Liability Company is	S:		
Purple Glass Bootique (Must contain the words "Limited Liabil	e LL	<u></u>	
(Must contain the words "Limited Liabil	ity Company, "L.L.	.C" or "Ll	.C.")
ARTICLE II - Address: The mailing address and street address of the particle.	orincipal office	of the L	imited Liability Company is:
Principal Office Address:	Mailing Ac	ddress:	
6337 W. Colonial dr Orlando, Fl 32818	6337 Orlanda	W.	Counted dr 32818
		·	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You registered age	must design	
Kensha Laws			
Nan	ne		
Kensha Laws Nan 6337 W. Celon.	al dr		
121 - 11 11 (1)		eceptabl	e)
Oclundo City	FL	3281	8
City	<u> </u>	Zip	<u> </u>
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as r	in this certifica icity. I further o performance o	te, I here agree to of my dut	by accept the appointment as comply with the provisions of all ies, and I am familiar with and
Régistèred Agont's Sig	mature (REOL	JIRED)	
		,	202
(CONTI	NUED)		2021 NOV 4
			₽"

ARTICLE IV-

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

Title:	Name and Address:		
"AMBR" = Authorized Member "MGR" = Manager			
WIGHT — Widinger		<u></u>	_
	1 /		
Marzon member	Kensha Laws		
	6337 W. Colinial Ar		_
. 2	Orlando, Fl 32818		_
MGR A mal	Douglas Hurt		_
	6331 W. Courses de		
0	origido fi 325-18		—
AMBK	Josica Trylor		_
	6337 W colonial de		_
	March , F1 32811		—
(Use attachment if necessary)		#2 ₁	
		<u>-</u> -	
CLE V: Other provisions, if any.		Þ	
		:	
			
REQUIRED SIGNATURE:)		(
$V \cup V$			
			_
Signature of a member or	an authorized representative of a me	mber	
This document is executed in accordance any false information submitted in a doct	e with section 605.0203 (1) (b), Florida Statutes ament to the Department of State constitutes a th	. I am aware ird degree f	e th: felo
as provided for in s.817.155, F.S.; Ken Sha Lau			
T	yped 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)