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SECRETARY OF STATE
TALLAHASSEE, FL

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

		_
BEAUTY DISCLOSE	D LLC	
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		Art of Inc. File
· · · · · · · · · · · · · · · · · · · 		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
org.nuttire		Vehicle Search
	·	Driving Record
Requested by:		UCC 1 or 3 File
Nama	Data Time-	UCC 11 Search
Name	Date Time	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier

January 8, 2022

CAPITAL CONNECTION, INC

SUBJECT: BEAUTY DISCLOSED LLC

Ref. Number: W22000002213

We have received your document for BEAUTY DISCLOSED LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only non-United States entities may become a domestic limited liability company as stated in section 605.1052, Florida Statutes. You may want to explore one of the conversion options. Please return to our website sunbiz.org to download the appropriate form.

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.

Neysa Culligan Regulatory Specialist III

Letter Number: 722A00000580

www.sunbiz.org

FILED

2022 JAN 12 AM 9: 29

SECRETARY OF STATE TALLAHASSEE, FL

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: BEAUTY DISCLOSED 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.)
(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)
06/12/2018 On
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: BEAUTY DISCLOSED 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 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 10th day of January	20_22		
	Signature of Authorized Representative	of Limited Liability Con	npany:	
	Signature of Authorized Representative: Printed Name: Taylor Lolya	Title:	A.P.	8
. /	Signature(s) on behalf of Other Business E Signature: District Name Toylor Louis)]
X	Printed Name: Taylor Lolya	Title: Authoriz	ed Person	
	Signature:Printed Name:	Title:		
	Signature:Printed Name:	Title:		
	Signature:Printed Name:	Title:		
	Signature: Printed Name:			
	Signature:Printed Name:	Title:		<u> </u>
	If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected	tor, or Officer.		
	If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:		
	If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partner	rship:	
	All others: Signature of an authorized person.			
	Fees:			
	Articles of Conversion: Fees for Florida Articles of Organiza Certified Copy: Certificate of Status:	\$25.00 ation: \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BEAUTY DISCLOSED LLC	
(Must contain the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")
ICLE II - Address: nailing address and street address of the principal offi Principal Office Address:	ice of the Limited Liability Company is: Mailing Address
3673 Justison Rd	3673 Justison Rd
Miami, FL 33133	Miami, FL 33133
3673 Justison Rd	3673 Justison Rd

The name and the Florida street address of the registered agent are:

Name

3673 Justison Rd
Florida street address (P.O. Box NOT acceptable)

 Miami
 FL
 33133

 City
 State
 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..

Lauren Finizio
Registered Agent's Signature (REQUIRED)

(CONTINUED)

7077 JAN 12 AM 9:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR AMBR	LAUREN FINIZIO 3673 Justison Rd Miami, FL 33133 THOMAS HAUGHTON 3673 Justison Rd Miami, FL 33133
	SEORETARY OF ST TALL AHASSEE, I
(Use attachment if necessary)	OF S.
he date of filing.)	cannot be more than five business days prior to or 90 days after opplicable statutory filing requirements, this date will not be listed as
REQUIRED SIGNATURE:	uren Finizio
Signature of a member or a	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.

LAUREN FINIZIO

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)