12200036730

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

Office Use Only



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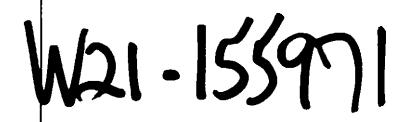
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SECRETARY OF STATE

[ALLAHASSEE, FLORIDA

D. O'KEEFE

FEB - 2 2022





December 7, 2021

NANCY WARING FITNESS AT WORK, LLC 1246 SW 5TH AVE BOCA RATON, FL 33432

SUBJECT: FITNESS AT WORK, LLC

Ref. Number: W21000155971

2021 DEC 21 PM 5: 00
SECRETARY OF STATE
TATA ANASSEE, FLORID

We have received your document for FITNESS AT WORK, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the marked sections in the Articles of Conversion. A signature is missing.

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.

DANIEL L O'KEEFE Regulatory Specialist II

2021 277 21 - FM Ha

Letter Number: 721A00029458

COVER LETTER

Division of Co	orporations			
SUBJECT: Fitness A	t Work, LLC			
Sobject.	(Name of Res	ulting Florida Limit	ed Compa	any)
The enclosed Articles Business Entity" into	of Conversion, Articl a "Florida Limited Li	les of Organization	on, and "in acc	fees are submitted to convert an "Other ordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
Nancy Waring				
	(Contact Person)			
Fitness At Work, LLC				
	(Firm/Company)			
1246 SW 5th Ave				
	(Address)			
Boca Raton, FL 33432				
((City, State and Zip Code)			
nancy@fitnessatworkm	id.com			
E-mail Address: (to be	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
Nancy Waring		at (516	456-99	45
(Name of Conta	ct Person)	(Area Code)	(Daytir	me Telephone Number)
	or the following amou a bank located in the		rocesse	d by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop	y.	□\$185.00 Filing Fees. Certified Copy. and Certificate of Status
Mailing Addi New Filing Se Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New Fi Divisio The Ce 2415 N	Address: ling Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303

TO: New Filing Section

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.

The name of the "Other Business Entity immediately prior to the filing of the Articles of Conversion is: Fitness At Work, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
12/07/2016 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Fitness At Work, 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.)
<u>Note:</u> 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 16	day of <u>November</u>	20	
Signature of Author	rized Representative of L	imited Liability Company:	
Signature of Authoric Printed Name: Nancy	zed Representative: Waring	Muy Warene Wile President	_
Signature(s) on beha	alf of Other Business Entit	<u>y:</u> See below for required signature(s)	
Signature: Printed Name: Augustian Signature: Printed Name: Augustian Signature: Printed Name: Augustian Signature: Augustia	ey Waring	X Tille: President	-\ -\ -\
Signature:Printed Name:		Title:	
Signature:Printed Name:		Title:	<u> </u>
Signature: Printed Name:		Title:	<u> </u>
Signature: Printed Name:		Title:	_
Signature:Printed Name:		Title:	<u>-</u>
	i <mark>on:</mark> m, Vice Chairman, Director rs have not been selected, a		
If Florida General F Signature of one Gen	<mark>Partnership or Limited Lia</mark> eral Partner.	ability Partnership:	
1f Florida Limited P Signatures of ALL G		ability Limited Partnership:	
All others: Signature of an author	orized person.		
Fees:			ALL/

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: TILED

RECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of th	Name: e Limited Liability Company	is:	
Fitness At Work,	, LLC		
	(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II -	- Address:		
The mailing ad	dress and street address of the	e principal office of the Limit	ed Liability Company is:
<u>Principal Offi</u>	ce Address:	Mailing Address:	
1246 SW 5th Av	هر.	1246 SW 5th Ave	
1240 3 W 301 AV			
Boca Raton, FL	- Registered Agent, Registe	Boca Raton, FL 33432 red Office, & Registered Ageristered Agent. You must designate a	gent's Signature:
ARTICLE III (The Limited Liabil business entity with	33432	red Office, & Registered Agent. You must designate a	gent's Signature: n individual or another
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Registerity Company cannot serve as its own R han active Florida registration.) the Florida street address of the Nancy Waring	ered Office, & Registered Agent. You must designate a	n individual of another
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Registerity Company cannot serve as its own R han active Florida registration.) the Florida street address of the Nancy Waring	red Office, & Registered Agent. You must designate a	n individual of another
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Registery Company cannot serve as its own R h an active Florida registration.) the Florida street address of the Nancy Waring Nancy Waring	ered Office, & Registered Agent. You must designate a the registered agent are:	n individual of another
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Registery Company cannot serve as its own R h an active Florida registration.) the Florida street address of the Nancy Waring Nancy Waring	ered Office, & Registered Agent. You must designate a	SECRETARY I
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Registery Company cannot serve as its own R h an active Florida registration.) the Florida street address of the Nancy Waring Nancy Waring	ered Office, & Registered Agent. You must designate a the registered agent are:	n individual of another

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		
MGR	Nancy Waring	<u>.</u>
 -	1246 SW 5th Ave	
	Boca Raton, FL 33432	
		
		
		
		
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(Use attachment if necessary)		26 ×
		E.C. 21
		ZOZI DEC 2 SECRLTAF ALLAHAS
CLE V: Other provisions, if any.		AS C =
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		S: C
REQUIRED SIGNATURE:		60 60
<u></u>	,	••
Manuellane		
Signature of a member or	an authorized representative of	`a member
This document is executed in accordance	e with section 605 0203 (1) (b). Florida S	antutes. I am aware that
any false information submitted in a docu	iment to the Department of State constitu	tes a third degree felony
as provided for in s.817-455, F.S.	•	

Nancy Waring

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)