12200358461

(Red	questor's Name)	
(Add	dress)	
(Ada	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to I	Filing Officer:	

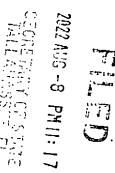
Office Use Only



700391965097



08/08/22--01018--030 **185.00



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 Arizon (Enter state, or if a non-U.S. entity, the name of the country) on 10/11/2004 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
(Enter Name of Florida Limited Liability Company) //
(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: (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 t which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.
2022 AUG SECRET

Signed this 27 day of July	_ _{20_} <u></u>	
Signature of Authorized Representative of Limit	ted Liability/Company:	
Signature of Authorized Representative: Printed Name: (A11/1614)	Title: Owner / MG	12_
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
Signature: Printed Name: Constant A Why G	_Title:Owner/MEN	_ _
Signature:Printed Name:	_ Title:	_ _
Signature:Printed Name:	_ Title:	
Signature:Printed Name:	Title:	- -
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 Liability Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit 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:	\$25.00 \$125.00 \$30.00 (Optional)	2022 AUG SECRETALLA
Certificate of Status:	\$5.00 (Optional)	B PHII: I

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company		
CWLIFE Ph	otography, LLC.	
(Must contain the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited I	Liability Company is:
Principal Office Address:	Mailing Address:	
1511 Epstennoil () #3)3	1811 Entruced 1 Entrucce FL	R) #303
Frigues FL 74223	- Enlinery FL	34223-
		
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Robusiness entity with an active Florida registration.)	red Office, & Registered Agent egistered Agent. You must designate an ind	t's Signature: lividual or another
The name and the Florida street address of the	ie registered agent are:	
(antimise	A. White ame poclmere Park Blow P.O. Box NOT acceptable)	
	ume	
3x57 W	inclinere Park Klyd	Apt.
Florida street address (F	P.O. Box NOT acceptable)	13-07
1/2011	34293	
City	FL 34293— Zip	
Having been named as registered agent an liability company at the place designated	d to accept service of process for I in this certificate. I hereby acce	the above stated limited of the appointment as
registered agent and agree to act in this cap	pacity. I further agree to comply:	with the provisions of all
statutes relating to the proper and comple	te performance of my duties, and	I am familiar with and
accept the obligations of my position as	registerea agent as proviaea jor ?	ın Chapter 605, r.s
/	/ *	SE 202
Payidard Avent's S	Signature (REQUIRED)	2022 AUG SECRETA
Registered Agents 3	ignature (REQUINED)	
CONT	TAULED)	
(CON I	'INUED)	
		· · · · · ·

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	// L A/N
MAR-Town	Constance of While _
1111111111111	3837 Woodnest Park Blv1 #13
	Constance A Who Do #13 Stance FL 34393
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE	
REQUIRED SIGNATURE:	/
REQUIRED SIGNATURE:	
	
Signature of a member or	an authorized representative of a member
Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance any false information submitted in a docu-	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony
Signature of a member or This document is executed in accordance any false information submitted in a docu-	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony
Signature of a member or This document is executed in accordance any false information submitted in a docu-	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes I am aware that ment to the Department of State constitutes a third degree felony
Signature of a member or This document is executed in accordance any false information submitted in a docu-	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony A. W. T. ped or printed name of signce
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817135. F.S.	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony The department of signee Filing Foos
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817135. F.S.	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee Filing Fees of Organization and Designation of Registered Segent
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817135. F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee Filing Fees of Organization and Designation of Registered Egent al) \$ 5.00 Certificate of Status (Optional)
Signature of a member or This document is executed in accordance any false information submitted in a docu- as provided for in s.817.155. F.S. On Terry Ty \$125.00-Filing-Fee for-Articles.0	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee Filing Fees of Organization and Designation of Registered Egent al) \$ 5.00 Certificate of Status (Optional)
Signature of a member or This document is executed in accordance any false information submitted in a docu- as provided for in s.817.155. F.S. On Terry Ty \$125.00-Filing-Fee for-Articles.0	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee Filing Fees of Organization and Designation of Registered Eigent al) \$ 5.00 Certificate of Status (Optional)
Signature of a member or This document is executed in accordance any false information submitted in a docu- as provided for in s.817.155. F.S. On Terry Ty \$125.00-Filing-Fee for-Articles.0	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee Filing Fees of Organization and Designation of Registered Egent al) \$ 5.00 Certificate of Status (Optional)
Signature of a member or This document is executed in accordance any false information submitted in a docu- as provided for in s.817.155. F.S. On Terry Ty \$125.00-Filing-Fee for-Articles.0	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee Filing Fees of Organization and Designation of Registered Egent al) \$ 5.00 Certificate of Status (Optional)

ARTICLE IV-





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

CWLIFE PHOTOGRAPHY, LLC

ACC file number: L14611830

was incorporated under the laws of the State of Arizona on 07/01/2008, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: 05/16/2022

Matthew Neubert, Executive Director

