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| (Re | equestor's Name) | |
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| (Ac | idress) | |
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| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (8u | usiness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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| | Office Use On | Iv HL |

Office Use Only



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COVER LETTER

| Division of C | orporations | | | | |
|--|--|----------------------------------|-----------------------|---|--------------------|
| SUBJECT. DIVINE | CARIBBEAN TOUCH BI | EAUTY SALON, | INC | | |
| 30b)EC1 | (Name of Res | sulting Florida Lir | nited Cor | npany) | |
| | • | _ | | d fees are submitted to convectordance with s. 605.1045, | |
| Please return all corre | espondence concernin | g this matter to | : | | |
| NADIA HERNANDEZ | | | | | ~ |
| | (Contact Person) | | _ | - | 120 Kg - |
| DIVINE CARIBBEAN 1 | TOUCH BEAUTY SALO | N. INC | | | Chi A |
| | (Firm/Company) | | <u> </u> | | 事 2 |
| 9911 SW 166TH ST | | | | | 95 |
| | (Address) | | _ | | 70.00 |
| MIAMI,FL 33157 | | | | | ME ANG 24 PH 1: C. |
| ((| City, State and Zip Code) | | _ | | 9 |
| NADIA.HERNANDEZ7 | 6@YAHOO | | | | |
| E-mail Address: (to b | e used for future annual re | port notifications) | | | |
| For further informati | on concerning this ma | tter, please call | : | | |
| NADIA HERNANDEZ | | _at (305 | 731-0 | 5729 | |
| (Name of Conta | ict Person) | (Area Coc | e) (Day | rtime Telephone Number) | |
| | or the following amou a bank located in the | | process | sed by this office must be pa | yable in US |
| ■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | S155.00 Filing Fees and Certificate of Status | □\$180.00 Filing and Certified C | | ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status | |
| Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I | ection orporations 7 | | New Divis The C | t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 | |

Tallahassee, 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 Tother Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045. Florida

Statutes

| Statutes. |
|---|
| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: DIVINE CARIBBEAN TOUCH BEAUTY SALON, INC |
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a (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) |
| 07/27/2022 on |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| DIVINE CARIBBEAN TOUCH BEAUTY SALON 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 9 day of AUGUST 20 22 | <u></u> - |
| Signature of Authorized Representative of Limited Liability | Company: |
| Signature of Authorized Representative: Printed Name: NADIA HERNANDEZ Title: AMBI | R |
| | |
| a lho | |
| Signature(s) on behalf of Other Business Entity: [See below for Signature: Printed Name: NADIA HERNANDEZ Title: PRESSIgnature: Printed Name: Title: Signature: Printed Name: Signature: Printed Name: Signature: | SIDENT |
| Signature: | |
| Printed Name: Title: | |
| Signature: | |
| Printed Name: Title: | For R Ti |
| Signature: | |
| Printed Name: Title: | |
| Signature: | |
| Printed Name: Title: | |
| Signature: | |
| Printed Name: Title: | |
| If Florida Corporation: | |
| Signature of Chairman, Vice Chairman, Director, or Officer. | |
| If Directors or Officers have not been selected, an Incorporator mu | st sign. |
| If Florida General Partnership or Limited Liability Partnershi Signature of one General Partner. | <u>p:</u> |
| | |
| If Florida Limited Partnership or Limited Liability Limited Pa Signatures of <u>ALL</u> General Partners. | ortnership: |
| All others: Signature of an authorized person. | |
| Fees: | |

Articles of Conversion:

\$25.00

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

\$125.00

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| DIVINE CARIBBEAN TOUCH BEAUTY SALO | |
|---|---|
| (Must contain the words "Limited I | iability Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: | |
| | he principal office of the Limited Liability Company is: |
| - | |
| Principal Office Address: | Mailing Address: |
| 9911 SW 166TH ST | 9911 SW 166TH ST |
| MIAMI,FL 33157 | MIAMI,FL 33157 |
| | |
| | 202 |
| The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of | tered Office, & Registered Agent's Signatures Registered Agent. You must designate an individual examples. |
| The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of NADIA HERNANDEZ | tered Office, & Registered Agent's Signatures Registered Agent. You must designate an individual examples. |
| The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of NADIA HERNANDEZ | 2000 |
| The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of NADIA HERNANDEZ | tered Office, & Registered Agent's Signatures Registered Agent. You must designate an individual examples. |
| The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of NADIA HERNANDEZ 9911 SW 166TH ST | tered Office, & Registered Agent's Signatures Registered Agent. You must designate an individual examples. |
| The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of NADIA HERNANDEZ 9911 SW 166TH ST | tered Office, & Registered Agent's Signatures Registered Agent. You must designate an individual agrayother the registered agent are: |

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)

| | th Ti | \sim | | 13.7 |
|---|-------|---------|------|-------|
| А | RT | I C . I | . P. | I V - |

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

| "AMBR" = Authorized Member "MGR" = Manager AMBR NADIA HERNANDEZ 9911 SW 166TH ST MIAMI,FL 33157 (Use attachment if necessary) LE V: Other provisions, if any. ENT #P22000059686 JUST NEED TO CHANGE FROM INC TO LLC CORPORATION. REQUIRED SIGNATURE: |
|--|
| AMBR NADIA HERNANDEZ 9911 SW 166TH ST MIAMI,FL 33157 (Use attachment if necessary) LE V: Other provisions, if any. ENT #P22000059686 JUST NEED TO CHANGE FROM INC TO LLC CORPORATION. REQUIRED SIGNATURE: |
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| LE V: Other provisions, if any. ENT #P22000059686 JUST NEED TO CHANGE FROM INC TO LLC CORPORATION. REQUIRED SIGNATURE: |
| |
| |
| 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 aware |
| any false information submitted in a document to the Department of State constitutes a third degree fe as provided for in s.817.155, F.S. |
| 114~ |
| $\sim 100^{\circ}/$ |
| NADIA HERNANDEZ |
| Typed or printed name of signee Filing Fees |