12200422609

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
On title 1 On the Control of Only
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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COVER LETTER

TO:	New Filing S Division of C				
CUD		Peachy Sec	cret		
SUB	JECT:	(Name of Res	sulting Florida Limit	ed Con	npany)
					d fees are submitted to convert an "Othe coordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concernin	g this matter to:		
		Joslyn Joseph			
Peac	hy Secret	(Contact Person)		_	
		(Firm/Company) 20930 Via Jasmine #2		-	
		(Address)		-	
		Boca Raton FL 33428		_	
		City, State and Zip Code) neolindaj@gmail.com			
E-1	mail Address: (to b	be used for future annual re	port notifications)	•	
For fu	urther informati	on concerning this ma	tter, please call:		
Joslyn Joseph		646 at ()	228-2662	
	(Name of Conta	nct Person)		(Day	vtime Telephone Number)
		for the following amou a bank located in the		roces:	sed by this office must be payable in US
(\$25 fo & \$12	50.00 Filing Fees or Conversion 5 for Articles (anization)	□\$155.00 Filing Fees and Certificate of Status	#\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations 27		New Divis The C	Filing Section sion of Corporations Centre of Tallahassee
	Tallahassee,	FL 32314		2415	N. Monroe Street, Suite 810

Tallahassee, FL 32303

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: Peachy Secret
(Enter Name of Other Business Entity)
LLC
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
01/31/2019
(date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Peachy Secret
(Enter Name of Florida Limited Liability Company) 09/20/2022
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 12th day	y of September	2022	<u>-</u>
Signature of Authorized	Representative of Li	mited Liabili	ty Company:
Signature of Authorized R Printed Name: Jos	lepresentative:	Fitle:	Owner/Manager
Signature(s) on behalf of	Other Business Entity		
Signature: Josh	n Joseph	Title:	Owner/Manager
Signature:Printed Name:		Title:	
Signature:Printed Name:			
Signature:			
Printed Name:		Title:	
Signature:Printed Name:		Title:	
Signature:Printed Name:		Title:	
If Florida Corporation: Signature of Chairman, Vio If Directors or Officers have			nust sign.
If Florida General Partne Signature of one General P		oility Partners	<u>hip:</u>
If Florida Limited Partne Signatures of ALL Genera	_	ility Limited	Partnership:
All others: Signature of an authorized	person.		
Fees:			
Articles of Conver Fees for Florida A Certified Copy: Certificate of State	rticles of Organization	\$25.00 : \$125.00 \$30.00 (C \$5.00 (Op	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

P	eachy Secret LL(C	
(Must contain the words "L	Limited Liability Cor	mpany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street addre	ess of the princi	ipal office of the Limited	d Liability Company is:
Principal Office Address:	<u>N</u>	1ailing Address:	
20930 Via Jasmine #2	2	0930 Via Jasmine #2	
	 -	Boca Raton FL 33428	
Boca Raton FL 33428	 -		
ARTICLE III - Registered Agent. The Limited Liability Company cannot serve a business entity with an active Florida registration. The name and the Florida street add	, Registered Of is its own Registered ion.)	ffice, & Registered Age Agent. You must designate an	individual of allocates
ARTICLE III - Registered Agent. The Limited Liability Company cannot serve a business entity with an active Florida registration	, Registered Of as its own Registered ion.) dress of the regi	ffice, & Registered Age Agent. You must designate an stered agent are:	individual of allocates
ARTICLE III - Registered Agent. The Limited Liability Company cannot serve a business entity with an active Florida registration	, Registered Of is its own Registered ion.)	ffice, & Registered Age Agent. You must designate an stered agent are:	individual of allocates
ARTICLE III - Registered Agent, The Limited Liability Company cannot serve a business entity with an active Florida registrat. The name and the Florida street add	, Registered Of as its own Registered ion.) Iress of the regions of the Joseph	ffice, & Registered Age I Agent. You must designate an stered agent are:	individual of allocates
ARTICLE III - Registered Agent. The Limited Liability Company cannot serve a business entity with an active Florida registrate. The name and the Florida street add	Registered Of as its own Registered ion.) Iress of the registered ion. Joslyn Joseph Name	ffice, & Registered Ago Agent. You must designate an stered agent are:	individual of allocates
ARTICLE III - Registered Agent. The Limited Liability Company cannot serve a business entity with an active Florida registrate. The name and the Florida street add	Registered On sits own Registered ion.) dress of the registered ion. Joslyn Joseph Name 930 Via Jasmine address (P.O. B	ffice, & Registered Age I Agent. You must designate an stered agent are:	midividual of allower

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.

(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	Joslyn Joseph	
	20930 Via Jasmine #2	
	Boca Raton FL 33428	
-		
	****	20
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(Use attachment if necessary)		33
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CLE V: Other provisions, if any.		⊸
	— C.	₽ <u></u>
	GRA D	 -
	5	2

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 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.

Joslyn Joseph

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)