L22000448103

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





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S. CHATHAM OCT 19 2022 SECRE FARY OF STATE ON VISION OF CORPORATIONS

COVER LETTER

TO: **New Filing Section** Division of Corporations

SUBJECT: GALERIE BLUE SQUARE LUC (Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

DIANNE BEAL
(Contact Person)

GALERIE BLUE SQUARE
(Firm/Company)

5825 COLLINS AUE 12F
(Address)

MIAMI BEACH, FL 33140 (City. State and Zip Code)

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

(Name of Contact Person)

(Name of Contact Person)

(Name of Contact Person)

(Area Code)

(Duytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles

of Organization)

☐\$155.00 Filing Fees and Certificate of

☐\$180.00 Filing Fees and Certified Copy

☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status

Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2022

SOUTHING AND SOUTHING THE SOUTH SOUTH SOUTH SOUTH SOUTHING OF THE SOUTHING OF

DIANNE BEAL GALERI BLUE SQUARE LLC 5825 COLLINS AVE. APT. 12F MIAMI BEACH, FL 33140

SUBJECT: GALERIE BLUE SQUARE LLC Ref. Number: W22000117149

We have received your document for GALERIE BLUE SQUARE 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.

DANIEL LO'KEEFE Regulatory Specialist II

Letter Number: 622A00020522

Applease her original file date; return tot!

Florida Filing? Search Services, Inc.

Thail you!

New form + payment
fefund for \$150 mg rejection
www.sunbiz.org 850-245-6052 letter

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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 8.605,1045, Florida Statutes

Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: 6 ALECTE BUSE SOME LUC.
(Linter Same of Other Business Linity)
2. The "Other Business Entity" is a UMITED UABILITY COMPANY (Enter entity type: Example: corporation, limited partnership, general partnership, common law of business trust, etc.)
First organized, formed or incorporated under the laws of DISTRICT OF COLUMBIA (Enter state, or if a non-U.S. entity, the name of the country)
on MAY ZW 2011 Idate of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
GALERIE BLUE SQUARE LLC
(Finter 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.
 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.

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Signed this 17th day of October	20 22
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative: Number 1988 Numb	Title: DWV F.2
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	Title: TWN EC
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
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 If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership;
All others: Signature of an authorized person.	
Pees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

he name of the Limited Liability Company is:		
(Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company	is;	
Principal Office Address: Mailing Address:		
5825 COLLINS AVE IZF MIRMI BEACH, FL 33140 5825 COLLINS AVE IZF MIRMI BEACH, FL 33140	22 JUL 26	SOUND APPROVE
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	- 26 F	A OF SO
The name and the Florida street address of the registered agent are:	PH 5: 47	RPC
	ä	:0 ->:
PAUL T. BLUE Name	۲ ۲	C.
SEZE COLLINS AVE. 12F		<i>₩</i>
Florida street address (P.O. Box NOT acceptable)		
MIAMI BEACH FL 33140 City Zip		
Having been named as registered agent and to accept service of process for the above stated lin liability company at the place designated in this certificate. I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provisions statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Registered Agent's Signature (REQUIRED)	of all and	
Registered Agent's Signature (REQUIRED)		

"AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager AMBL	DIANNE BEAL 5825 COLLING AVE 12F MIAMI BEACH FL 33140	1
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(Use attachment if necessary)		
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REQUIRED SIGNATURE:	reflect an authorized representative of a member	
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance of the secondary talse information submitted in a do	or an authorized representative of a member nee with section 605.0203 (1) (b). Florida Statutes, I am aware that cument to the Department of State constitutes a third degree felony	
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any talse information submitted in a document is provided for in s.817.155, F.S.	or an authorized representative of a member nee with section 605.0203 (1) (b). Florida Statutes. I am aware that current to the Department of State constitutes a third degree felony	
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any talse information submitted in a document is provided for in s.817.155, F.S.	or an authorized representative of a member	

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

ARTICLE IV-

Company: