# L2200047/531

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

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### COVER LETTER

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

.

# SUBJECT: BOCA DANCE LLC

(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:

### ALEXANDRA SIERRA-DE VARONA, ESQ.

(Contact Person)	····			
DE VARONA LAW				
(Firm/Company)				
4800 N. FEDERAL HWY., SUITE 104D				
(Address)				
BOCA RATON, FL 33431				
(City, State and Zip Code ASD@DEVARONALAW.COM	)			
E-mail Address: (to be used for future annual	report notifications)		22 OCT SECRUD ALLAHAS	_
For further information concerning this n	natter, please call:			
ALEXANDRA SIERRA-DE VARONA	561 600-9 at ( )	9080	28 282 28	<u> </u>
(Name of Contact Person)		ytime Telephone Number)		
Enclosed is a check for the following amo dollars and drawn on a bank located in th		sed by this office must	bê payable in	US
<ul> <li>\$150.00 Filing Fees</li> <li>\$155.00 Filing Fees</li> <li>\$155.00 Filing Fees</li> <li>\$25 for Conversion</li> <li>\$125 for Articles</li> <li>\$125 for Ar</li></ul>	■S180.00 Filing Fees and Certified Copy	□\$185.00 Filing Fees. Certified Copy, and Certificate of Status		
Mailing Address: New Filing Section		<u>t Address:</u> Filing Section		

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

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: BOCA DANCE, LLC

(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 Wyoming

(Enter state, or if a non-U.S. entity, the name of the country)

on May 17, 2019

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

BOCA DANCE LLC

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(Enter Name of Florida Limited Liability Company)	Ās	• •	
4. If not effective on the date of filing, enter the effective date:	EC8	22 00	וד
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90	catenda	ar-day	s after
the date this document is filed by the Florida Department of State.)	55 N	 28	<u> </u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date	will-not b	e listed	asthe
document's effective date on the Department of State's records,		1	1 • 1
	5-	Ð	$\circ$
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.

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Signed this 24th day of October	_ 20 <u>_<b>22</b></u>		
Signature of Authorized Representative of Limi	ited Liability Company:		
Signature of Authorized Representative: Printed Name: ALEXANDRA SIERRA DE VARONA	Title: AUTHORIZED REPRESENTATIVE	-	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature: Printed Name: ALEXANDRA SIERRA-DE VARONA	Title: AUTHORIZED REPRESENTATIVE	-	
Signature: Printed Name:		-	
Signature: Printed Name:	Title:	-	
Signature: Printed Name:	Titler	-	
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 Ind		22 SEC	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	OCT 28 DRCIAR AMASS	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	A OF STATE	M D
<u>All others:</u> Signature of an authorized person.			-
Fees:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optionał) \$5.00 (Optional)		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

### BOCA DANCE LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>Mailing Address:</u>		
6030 SW 18TH STREET	6030 SW 18TH STREET		
Suite A-1	Suite A-1		
Boca Raton, FL 33433	Boca Raton, FL 33433		

### 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.)

The name and the Florida street address of the registered agent are:

Alexandra Sierra-De Va	rona, Esq.		
	Name		
4800 N. Federal Hwy, S	uite 104D		
Florida street addres	s (P.O. Box <u>NOT</u> acceptable)	Ξω N	
Boca Raton	33432 FL	22 OCT SECREI FALLAH	Т
City	Zip	T 28 TASSE	Ē

Having been named as registered agent and to accept service of process for the above stated linking liability company at the place designated in this certificate. Thereby accept the appointment as registered agent and agree to act in this capacity. Tfurther 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> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR	Jo A. Meacham	
	600 Canistel Lane	
	Boca Raton, FL 33486	
MGR	Melanie A. Gibbs	
	600 Canistel Lane	
	Boca	,
	-	
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(Use attachment if necessary)		T
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TICLE V: Other provisions, if any.		T 2
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· - ·		
REQUIRED SIGNATURE:		<u> </u>

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. Exandra Serva - De Varana, Legal and Anthorized Representation 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)