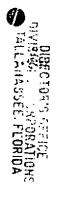
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Enlity Name)
(Document Number)
Copies Certificates of Status
al instructions to Filing Officer:
Office Use Only



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02/22/23--01001--016 **150.00



SECEIVED

COVER LETTER

Division of Corporations		
SUBJECT: Halo Aesthetica	uc	
	sulting Florida Limited Co	mpany)
The enclosed Articles of Conversion, Articles Susiness Entity" into a "Florida Limited L	iability Company" in a	
Please return all correspondence concerning	ig this matter to.	
Hiedu A LOCK		
Hiedy A LOCK— (Contact Person)		
(Firm/Company)		
•		
124 westwood brive (Address) Daytern Beach, FL 3 (City. State and Zip Code)		
South May March [7] 3	25 114	
(City. State and Zip Code)) 41 1	
halo aesthetica@gmai	l. com	
E-mail Address: (to be used for future annual r	eport notifications)	
For further information concerning this ma	atter, please call:	
Hiedu Lock	0.(812)	20 1211
(Name of Contact Person)	(Area Code) (Da	ytime Telephone Number)
Enclosed is a check for the following amo dollars and drawn on a bank located in the		sed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address:		et Address:
New Filing Section		Filing Section
Division of Corporations P.O. Box 6327		sion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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 Article Halo Alsthetica Incorporated.	es of Conversion is:
(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 Hovida	
(Enter state, or if a non-U.S. entity, the	name of the country)
on 5th day of April, 2022 (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 Article Halo Artstyletica, LLC	eles of Organization:
(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.)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
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 apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	al rights the amount to

Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: Dicky Abd Printed Name: Hicky Low Title: Owner Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Title: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Sees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (Optional)	Signed this 22nd day of February	20_23
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature:	J Signature of Authorized Representative of Lim	ited Liability Company:
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature:	Simon of Australia & Barrers Winds	1 HOUR
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature:	Printed Name: Hill 101K	Title: Ou hall
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Certified Copy: \$30.00 (Optional)		
• •		
Certificate of Status: \$5.00 (Optional)	Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Halo Aesthetica	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Daytona Beach, FL 32119	129 Westwood Drive Daytona Beach FL 32119
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
Hiedy LOIK	
Name	
124 Westwood Strive	
Florida street address (P.O.	
Bayton Beach City	FL 32119 Zip
City	Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S

(CONTINUED)

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

Title:	
"AMBR" = Authorized Member	
"MGR" = Manager	Wied. Lock
MAR	Hicay Lock
	124 Julythood by Naviona Brain, the 32/19
	paytona Bracky +2 32119
	A-4-8-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
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(Use attachment if necessary)	
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CLE V: Other provisions, if any.	W.
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document in a submitted in a document in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am awaiment to the Department of State constitutes a third degree
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