

L23000344300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

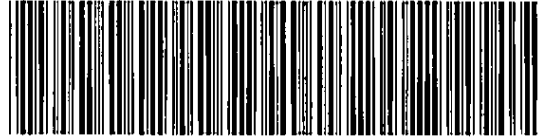
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED

2023 JUL 20 PM 3:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2023 JUL 20 PM 2:45

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

Please use funds from this account: I20210000160: AMOUNT: \$150.00

Authorization Signature: \_\_\_\_\_

THE TOX FRANCHISING GROUP LLC  
BUSINESS

DOC#

     **Certified Copy of Articles**

     **Certificate of Status**

**NEW FILINGS**

     Profit Corp  
     Not for Profit  
     Officer/Director  
     Limited Liability  
     Domestication  
     Other  
     **CORP**  
     **LLLP**

**AMENDMENTS**

     Amendment  
     Resignation of R.A. or member  
     Dissolution  
     Change of Registered Agent  
     Revocation of Dissolution  
     Merger  
  X   **Conversion**  
     **Amended and restated Articles**  
     **Statement of Authority**

**OTHER FILINGS**

     **Trademark**  
     Annual Report  
     **NOTARY REGISTRATION**  
     Fictitious Name  
     **APOSTILLE**  
                    **Country**

**REGISTRATION/QUALIFICATIONS**

     Foreign filing  
     Limited Partnership  
     Reinstatement  
     Other

**EXAMINER'S INITIALS:** \_\_\_\_\_

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**EXAMINER'S INITIALS:**

## COVER LETTER

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

**SUBJECT:** THE TOX FRANCHISING GROUP 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:

RYAN YEAGER

(Contact Person)

THE TOX

(Firm/Company)

2145 SANFORD CT

(Address)

VERO BEACH, FL 32963

(City, State and Zip Code)

ryan@thetoxcorp.com

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

For further information concerning this matter, please call:

Ryan Yeager

at (772) 201-2199

(Name of Contact Person)

(Area Code) (Daytime 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)

☒ \$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:**

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

**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:  
**THE TOX FRANCHISING GROUP LLC**

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a **LLC**  
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of **California**  
(Enter state, or if a non-U.S. entity, the name of the country)

on **01/24/2021**  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
**THE TOX FRANCHISING GROUP 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.

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3:16

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

THE TOX FRANCHISING GROUP 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:

2145 SANFORD CT  
VERO BEACH, FL 32963

### Mailing Address:

2145 SANFORD CT  
VERO BEACH, FL 32963

## 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:

RYAN YEAGER

Name

2145 SANFORD CT

Florida street address (P.O. Box NOT acceptable)

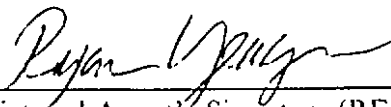
VERO BEACH

FL 32963

City

Zip

*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)

2023 JUN 20 PM 2:45

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

THE TOX FRANCHISE HOLDINGS CORPORATION

2145 SANFORD CT

VERO BEACH, FL 32963

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V: Other provisions, if any.**

Authorized Entity to manage Florida LLC: THE TOX FRANCHISE HOLDINGS CORPORATION (FL CORP)

\_\_\_\_\_

**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.

RYAN YEAGER

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)**

20 PM 2:45  
FILED  
MAR 10 2010

Signed this 20 day of JULY 2023 20

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: Ryan Yeager

Printed Name: Ryan Yeager Title: owner

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: Ryan Yeager

Printed Name: Ryan Yeager Title: Owner

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

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 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 Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**All others:**

Signature of an authorized person.

**Fees:**

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

2023 JUL 20 PM 2:45





# Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: THE TOX FRANCHISING GROUP LLC  
Entity No.: 202102810067  
Registration Date: 01/24/2021  
Entity Type: Limited Liability Company - CA  
Formed In: CALIFORNIA  
Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 19, 2023.

SHIRLEY N. WEBER, PH.D.  
Secretary of State

2023 JUL 20 PM 2:45  
JUL 20 2023

Certificate No.: 130853631

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at [bizfileOnline.sos.ca.gov](https://bizfileOnline.sos.ca.gov).