183000351627

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

Office Use Only



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2023 JUL _6 AH 3: 5 SECRETARY OF STATE

COVER LETTER

Division of Co							
SUBJECT: ESSENC	E OF NATURE DAY S	PA LLC					
Sobsect.	(Name of Re	sulting Florida Lin	ited Cor	npany)			
				d fees are submitted to co ecordance with s. 605.104		*Other	-
Please return all corre	spondence concernin	g this matter to:					
ALEXANDRA GELINAS	S ROY		_				
	(Contact Person)						
ESSENCE OF NATURI	E DAY SPA LLC						
	(Firm/Company)		_				
18294 RIDGELINE DRI	VE						
	(Address)						
ESTERO FL 33928							
(C	ity, State and Zip Code)						
alex.gelinas.roy@gmail	.com						
E-mail Address: (to be	used for future annual re	port notifications)					
For further informatio	n concerning this ma	tter, please call:					
Alexandra Gelinas Roy		at (, 616-6	306-5480			
(Name of Contac	t Person)	_ \	e) (Day	time Telephone Number)			
Enclosed is a check fo dollars and drawn on a	_	•	process	ed by this office must be	payable ii	n US	
(\$25 for Conversion	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	SECRETALLA	2023 JUL	eng)
Mailing Addre New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FI	ction rporations		New I Divisi The C 2415	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 8 hassee, FL 32303	ARY OF STATE HASSEE, FL 10	_6 AM 3:51	

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 Articles of Conversion is: ESSENCE OF NATURE DAY SPA LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a FOREIGN LIMITED LIABILITY COMPANY (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
1/3/2023 on
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ESSENCE OF NATURE DAY SPA 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.

THE END SECRETARY OF STATE

·	
Signed this 24 day of May 2023	. •
Signature of Authorized Representative of Limited Liability Co	трапу:
Signature of Authorized Representative: Printed Name: ALEXANDRA GELINAS ROY Title: OWNER	
Signature(s) on behalf of Other Business Entity: [See below for re	quired signature(s)]
Signature:	
Printed Name: ALEXANDRA GELINAS ROY Title: OWNER	
Signature:	
Printed Name: Title:	
Signature:	
Printed Name: Title:	
Signature:	
Signature: 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 signature.	gn.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Limited Partners. Signatures of ALL General Partners.	ership:
All others: Signature of an authorized person.	

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

Fees:

\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	A Comment of the	
The name of the Limited Liabil	ity Company is:	
ı		
ESSENCE OF NATURE DAY SP.	A LLC	
(Must contain the we	ords "Limited Liability Company, "L.L,C,," or "LLC,")	
ARTICLE II - Address:		
	address of the principal office of the Limited Liabi	lity Company is:
,	,	
Principal Office Address:	Mailing Address:	
18294 RIDGELINE DRIVE	18294 RIDGELINE DRIVE	
ESTERO, FL 33928	ESTERO FL 33928	
		
		
ARTICLE III - Registered Ag	gent, Registered Office, & Registered Agent's Si	gnature:
(The Limited Liability Company cannot so business entity with an active Florida reg	erve as its own Registered Agent. You must designate an individual	or another
The name and the Florida street	address of the registered agent are:	
ANDREW B	ALDERSON	
	Name	
	SELVE DONG	
	ect address (P.O. Box <u>NOT</u> acceptable)	
rionda str 以	1	
ESTERO	. FL ³³⁹²⁸	
 	i City Zip	
	·	
	ered agent and to accept service of process for the a	
Harimy company at the pa	ice designated in this certificate. I hereby accept the act in this capacity. I further agree to comply with t	-appoiniment as he provisions of all
etantes velatina to the prop	ir and complete performance of my duties, and I am	tamiliar with and
accept the obligations of n	y position as registered agent as provided for in Ch	apter 605, F.S.,
		,
100	7	
<u> </u>	COLOURS COLOURS	
Regist e i !!	red Agent's Signature (REQUIRED)	S 22
'I		2023 JUL _ 6 SECRETARY TALLAHA
4	(CONTINUED)	
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		ARY ARY AHAS
4	•	SC P

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	ALEXANDRA GELINAS ROY
	18294 RIDGELINE DRIVE
	ESTERO FL 33928
	
	`
(Use attachment if necessary)	
	-
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
1 2	
6:	
	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware that
	ment to the Department of State constitutes a third degree felony
as provided for in s.817.155, F.S.	non to the Department of State constitutes a time degree terony
•	
ALEXANDRA GELINAS ROY	<u> </u>
Ty	ped or printed name of signee $\overline{>}C$
	Filing Fees 日常 日
\$125.00 Filing Fee for Articles o	f Organization and Designation of Registered Age
\$ 30.00 Certified Copy (Options	
w some certained copy (Options	mi, w woo certificate or creates (25 phonism)
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	SEE SEE
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