

(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:
W230000 107379





07/14/23--01010--010 **150.00







FLORIDA DEPARTMENT OF STATE Division of Corporations

August 7, 2023

TAYLOR N. BEAVIS 903 WOODSTREAM LN ORMOND BEACH, FL 32174 US

SUBJECT: AFTER HOURS STUDIO LLC

Ref. Number: W23000107379

CHECK ALPEADY W/ YOUR B

THANK YOU!

We have received your document for AFTER HOURS STUDIO LLC and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

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.

Carlos E Rico Supervisor

Letter Number: 323A00017805

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: AFTER HOLS (Name of Resu	STOPIO LLC Ulting Florida Limited Company)
	es of Organization, and fees are submitted to convert an "Other ability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	this matter to:
TAYLORN. BEAVIS (Contact Person)	
APTER HOURS STUD (Firm/Company)	10.000
903 WOODSTREAM (Address)	
OPMOND BEACH FL 33 (City, State and Zip Code)	2174
TAY LORGA FTEKH WESST E-mail Address: (to be used for future annual rep	OPID, CO ort notifications)
For further information concerning this matt	·
TAYLOR BEAUS (Name of Contact Person)	at (<u>508</u>) <u>269-6152</u> (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amoundollars and drawn on a bank located in the U	nt: (All checks processed by this office must be payable in US Juited States)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$ \$155.00 Filing Fees and Certificate of Status	□S180.00 Filing Fees and Certified Copy □S185.00 Filing Fees, Certified Copy, and Certificate of Status □S185.00 Filing Fees, Certified Copy and Certificate of Status □S185.00 Filing Fees, Certified Copy and Certificate of Status □S185.00 Filing Fees, Certified Copy and Certificate of Status □S185.00 Filing Fees, Certified Copy and Certificate of Status □S185.00 Filing Fees, Certified Copy and Certified Copy and Certified Copy and Certified Copy Status □S185.00 Filing Fees, Certified Copy and Certified Copy and Certified Copy Status □S185.00 Filing Fees, Certified Copy and Certified Copy Status □S185.00 Filing Fees, Certified Copy and Certified Copy Status □S185.00 Filing Fees, Certified Copy and Certified Copy Status □S185.00 Filing Fees, Certified Copy Stat
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 CS Tallahassee, FL 32303

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 AFTER HOURS STUDIO (LICE (Enter Name of Other Business Entity)	s of Conversion is:
2. The "Other Business Entity" is a	n law or business trust, etc.)
First organized, formed or incorporated under the laws of	name of the country)
on 2/27/2023 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	eles of Organization:
(Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date: 9/10/2023. (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 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 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.	will not be listed as the
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	
	2023 DCT - 6 PM

Signed this SEP day of	r <u> </u>	20_23	
Signature of Authorized Re	epresentative of L	imited Liability Company:	
Signature of Authorized Rep Printed Name: TA+LOZ	resentative: 10 - 13EAV 15	Tille: MANALOER	
Signature(s) on behalf of Otl	her Business Entity	v: [See below for required signa	iture(s)
Signature: TWM	22		
Printed Name: TATLUZ	- BEAULS	Title: MANAGEE	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:		Title:	
Printed Name:		Title:	
Signature:		Title:	
Printed Name:		Title:	
Signature:		Title:	
Printed Name:		Title:	
If Florida Corporation: Signature of Chairman, Vice Officers have n			
If Florida General Partnersl Signature of one General Partnersl		bility Partnership:	
If Florida Limited Partnersh Signatures of ALL General Pa		bility Limited Partnership:	
All others: Signature of an authorized per	rson.		
Fccs:			
Articles of Conversio	en:	\$25.00	

\$125.00

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

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status: 1623 GCT -6 PM 1:50

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLI	E I - Name:
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The name of the Limited Liability Company is:

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
903 WCOD STREAM LU	903 WOOD STREAMS LN
ORMOND BEACH, FL	ORMOWN BEACH, FL
32174	32174

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:

DHARON C. BEAVIS 640 500THUAKE PRIVE Florida street address (P.O. Box NOT acceptable) ORMOND BEACH FL 32174

City Zio

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)

Title:	Name and Address:
"AMBR" = Authorized Member	Name and Audress:
"MGR" = Manager	
MbR	TAYLOR BEAVIS
	903 WOODSTREAM LAND
	·
	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	

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.

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)-

Control Number: 23050506

STATE OF GEORGIA

Secretary of State

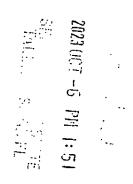
Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, Brad Raffensperger, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

After Hours Studio LLC a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on 02/27/2023 by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.



WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on 03/06/2023.



Brad Raffonspager

Brad Raffensperger Secretary of State