L24000010319

(Requestor's Name)
(Address)
(Address)
(1831633)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified dopies Certificates of States
Special Instructions to Filing Officer.

Office Use Only



000415474490

12-28-27



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 230404 4305390

AUTHORIZATION : THE REAL MAN

COST LIMIT : \$ 150.00

ORDER DATE: December 27, 2023

ORDER TIME : 8:32 AM

ORDER NO. : 230404-010

CUSTOMER NO: 4305390

FOREIGN FILINGS

NAME: BOBBI BROWN EVOLUTION L.L.C.

CORPORATE
LIMITED PARTNERSHIP

XX LIMITED LIABILITY COMPANY

XXXX ARTICLES OF CONVERSION AND ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

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.

	(Enter Name of Other Business Entity)
2. The "Other Business	limited liability company s Entity" is a
	type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed	or incorporated under the laws of
g,	(Enter state, or if a non-U.S. entity, the name of the country)
October 19, 2001	
On	ormation or incorporation)
(and of organization, in	Annual of the opposition)
3. The name of the Flo	rida Limited Liability Company as set forth in the attached Articles of Organization:
Bobbi Brown Evolution L	LC
	(Enter Name of Florida Limited Liability Company)
	(Date Hade of Fords Ending Company)
4. If not effective on th	e date of filing, enter the effective date:
The effective date: Ca the date this documen <u>Note:</u> If the date inserted in	the date of filing, enter the effective date: annot be prior to date of receipt or filed date nor more than 90 calendar days after it is filed by the Florida Department of State.) a this block does not meet the applicable statutory filing requirements, this date will not be listed as the in the Department of State's records.
The effective date: Cathe date this documen Note: If the date inserted in document's effective date or	annot be prior to date of receipt or filed date nor more than 90 calendar days after t is filed by the Florida Department of State.) this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this 22nd day of December	_ 20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: /s/ S Printed Name: Steven D. Plofker	tevenaD. Plofker Title: Member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature:	
Printed Name: Stevens Of Plotker	Title: Member
Simon Baldi Brown	
Printed Name: Bobbi Brown Plofker	Title: Member
Signature: Printed Name:	Title:
Signature: -Printed-Name:	Tial
rnined Name:	
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 Inc	
14 m	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
organical of the General Latiner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
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)

702305C28 PH 2:55

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company i	s:	
BOBBI BROWN EVOLUTION LLC		
(Must contain the words "Limited Liab	ility 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:	Mailing Address:	
4495 Military Trail	4495 Military Trail	
Suite 207	Suite 207	
Jupiter, FL 33458	Jupiter, FL 33458	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)		lividual or another
The name and the Florida street address of th	e registered agent are:	7023 DEC
Steven D. Plofker		3 (5)
Na	me	28
3220 Monet Drive West		PR IT
Florida street address (P	.O. Box <u>NOT</u> acceptable)	<i>∾</i> ⊃
Palm Beach Gardens	FL 33410	S 57
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)

<u>Γitle:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	Steven D. Plofker
AIVIDIT	3220 Monet Drive West
	Palm Beach Gardens, FL 33410
AMBR	Bobbi Brown Plofker
	3220 Monet Drive West
	Palm Beach Gardens, FL 33410
 .	
	
(Use attachment if necessary)	

REQUIRED SIGNATURE:

848C0F636CC547D.

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.

Steven D. Plofker

Typed or printed name of signee

Filing Fees

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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: Bobbi Brown Evolution L.L.C.
(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
(Enter state, or if a non-U.S. entity, the name of the country)
October 19, 2001
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Bobbi Brown Evolution 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.

Signed this 22nd day of December	_20
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative: /s/ St Printed Name: Steven D. Plofker	tevenub. Plofker Title: Member
Signature(s) on behalf of Other Business Entity: [5	See below for required signature(s)]
Signature:	
Printed Name: Steventone by:	
Signature: Bobbi Brown Printed Name: Goodsi Brown Plofker	Tid. Member
Printed Name. 190901 Prointel	Tiffe: Member
Signature:Printed Name:	Title:
Signature: Printed-Name:	Title:
Signature:	
Printed Name:	
Signature:Printed Name:	Title:
	Tiuc.
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fces:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BOBBI BROWN EVOLUTION LLC	
(Must contain the words	Limited Liability Company, "L.L.C.," or "LLC")
ARTICLE II - Address:	
	ess of the principal office of the Limited Liability Company is
•	·
Principal Office Address:	Mailing Address:
Principal Office Address:	Mailing Address:

Steven D. Plofker	
Nan	ne
3220 Monet Drive West	
Florida street address (P.	O. Box <u>NOT</u> acceptable)
Palm Beach Gardens	FL ³³⁴¹⁰
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)

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager AMBR	Steven D. Plofker	
	3220 Monet Drive West	
	Palm Beach Gardens, FL 33410	
AMBR	Bobbi Brown Plofker 3220 Monet Drive West	
		
(Use attachment if necessary)		
LEV: Other provisions, if any.		
	·	
REQUIRED SIGNATURE:		
64 BCOF 6360 C 547 D.	an authorized representative of a member	

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)

Typed or printed name of signee