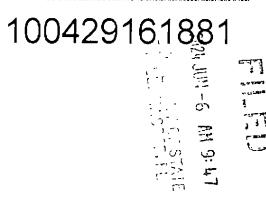
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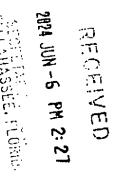
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only





08/68/24~~0100,--02: **:50.03



CORPORATE ACCESS,

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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	CERTIFIED COPY			
XX	РНОТОСОРУ			
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XX	FILING	CO	NVERSION	
1.	WILD PINK OUTDO	OCUMENT #)		
2.	(CORPORATE NAME AND DO	OCÚMENT#)		702h Juni
3.				or James
4.	(CORPORATE NAME AND DO	OCUMENT#)		
•	(CORPORATE NAME AND DO	OCUMENT #)		17
5.	(CORPORATE NAME AND DO	OCUMENT #)		
6.				
SPECIA	CORPORATE NAME AND DO	OCUMENT #)		
	_	<u>.</u>		

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: WILD PINK OUT	I POOR, INC
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conver Business Entity" into a "Florida	sion, Articles of Organization, and fees are submitted to convert an "Other Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence	concerning this matter to:
David L. Paul	
(Contact P	erson)
Rosende Velez & Paul PLLC	
(Firm/Con	pany)
8200 NW 41st St, Suite 318	
(Addre	ss)
Miami, FL 33166	
(City, State and	Zip Code)
david@rvplawyers.com	
E-mail Address: (to be used for fut	
For further information concerni	ng this matter, please call:
David L. Paul	at (305)701-2099
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the followdollars and drawn on a bank local	wing amount: (All checks processed by this office must be payable in US ited in the United States)
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 I and Certificat Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassec, 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 follo	wing
"Other Business Entity" into a	Florida Limited Liability Company in accordance with s.605.1045	í. Florida
Statutes.	y = === y == =========================	, 101144
1. The name of the "Other Busin WILD PINK OUTDOOR, INC.	ness Entity" immediately prior to the filing of the Articles of Conversi	ion is:
	†	-
(Énter Name of Other Business Entity)	
2. The "Other Business Entity":		
(Enter entity type. Exan	riple: corporation, limited partnership, general partnership, common law or business	s trust, etc.)
First organized, formed or incorp	porated under the laws of Florida	
	(Enter state, or if a non-U.S. entity, the name of the cour	intry)
on 09/19/2012	<u>.</u>	
(date of organization, formation or	incorporation)	
3. The name of the Florida Limi	ited Liability Company as set forth in the attached Articles of Organ	ìization:
		<u>3</u>
Lux Beauty Labs LLC	1 3	ئەن = =
(Enter Na	me of Florida Limited Liability Company)	دادس. : ال ال
		1
4. If not effective on the date of	filing, enter the effective date:	
	prior to date of receipt or filed date nor more than 90 calendar da	avs after_
the date this document is filed	by the Florida Department of State.)	ا <i>ل</i> ت `د
Note: If the date inserted in this block	does not meet the applicable statutory filing requirements, this date will not be liste	ed as the
document's effective date on the Depar	rement of State's records.	I
5. The plan of conversion has be	en approved in accordance with all applicable statutes.	
6. The "Converted or Other Busin which such members are entitle	ess Entity" has agreed to pay any members having appraisal rights the ared under ss. 605.1006 and 605.1061-605.1072, F.S.	mount to

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

ARTICLES OF OR	 GANIZATION FOR FL 	ORIDA LIMITED	LIABILITY COMPANY
ARTICLE I - Name	•		
	ted Liability Company is:		
Lux Beauty Lab	s LLC		
	ontain the words "Limited Liability	Company, "L.L.C.," or "LL	.C.")
ARTICLE II - Addr			•
		acinal office of the T	imited Liability Company is:
	bit officer address of the pri	nethan office of the L	imited Liability Company is:
Principal Office Add	ress:	Mailing Address:	
2273 Lee Road		2272	
Winter Park, FL 3278	9	2273 Lee Road Winter Park, FL 327	780
	-	TTIMOTT GIR, I L 321	
ARTICLE III - Regi (The Limited Liability Composition business entity with an activ	stered Agent, Registered any cannot serve as its own Registe Florida registration.)	Office, & Registered red Agent. You must design:	l Agent's Signature: ate an individual or another
The name and the Flor	 rida street address of the re		
The same and The	ion anoct address of the le	gistered agent are:	
Ro	sende Velez & Paul PLLC		
	Name	-	
82	 00 NW 41st St, Suite 318		
	lorida street address (P.O.	Rox NOT acceptable	<u>, </u>
-		box 1101 acceptante)
<u></u>	Miami	FL 33166	
	City	Zip	22
Having been named	as registered agent and to	accent remies of annual	ess for the above stated limited
uanuuv comnamv	All the hince decimated in i	hic contificate I hand	the same and all a series of the series of t
– техімегей аует апа	1.00Tee to act in this canacit	u. I fræther comme to a	amakanish shakaranish a . C. II
statutes relating to	the proper and complete pe	rformance of my dutie	es, and I am familiar with and
accept the obliga	tions of my position as regi	stered agent as provid	led for in Chapter 605, F.S.
i	DocuSigned by:		
•	till Whittaker		~
_	Registered Agent's Signa	ture (REOLURED)	
	, , , , , , , , , , , , , , , , , , ,	()	
	(CONTINU	ED)	

The name and address company:	f each person authorized to manage and control the Limited Liabili
<u>Title:</u> "AMBR" = Authorized	Name and Address: Member
"MGR" = Manager AMBR	Pink Family Holdings 1140 Lake Harney Woods Blud Mim (FL 32754
AMBR	Kismet Family Holdings, LLC 390 North orange Ave, Suite 1400 Orialido, EL 32801
(Use attachment if nece	
RTICLE V: Other provisions	
ny legal business purpos	if any. 9.
	' ·-
REQUIRED SIGNAT	JRE: Docustigned by: Jill Whittaker F0838C077554F0
This document is execute	
\$125.00 Filing Fee	Typed or printed name of signee Filing Fees or Articles of Organization and Designation of Registered Agen