L24000321318

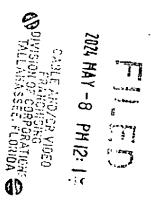
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: 05/08/24
6461 WEYOUUU59043

Office Use Only



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03/26/24--01003--018 **185.00





FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2024

LOUISE TREVENA LIVE LIFE WITH WONDER LLC 501 PENMAN ROAD NEPTUNE BEACH, FL 32266 US

SUBJECT: LIVE LIFE WITH WONDER LLC

Ref. Number: W24000059043

We have received your document for LIVE LIFE WITH WONDER LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(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.

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.

Rickey L Richardson Regulatory Specialist II Letter Number: 524A00008079

204 AY -8 AH 8: 34

204 AY -8 AH 8: 34

205 SERVICES

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: LIVE LIFE WITH WONDER LINE (Name of Resulting Florida Limited Company)	LC.
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.	
Please return all correspondence concerning this matter to:	
LOUISE TREVENA (Contact Person) LIVE LIFE WITH WONDER LLC (Firm/Company)	
LIVE LIFE WITH WONDER LLC (Firm/Company)	
501 PENMAN ROAD (Address)	
NEPTUNE BEACH FL 32266 (City, State and Zip Code)	
NEPTUNE REACH FL 32266 (City, State and Zip Code) Lulu, trevena O gmail. Com E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (A04) 644 4837 (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount: (All checks processed by this office must be payab dollars and drawn on a bank located in the United States)	le in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of \$180.00 Filing Fees and Certified Copy & Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section New Filing Section	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

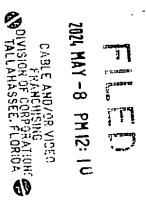
Articles of Conversion

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:
LIVE LIFE WITH WONDER LLC M23000004182
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of GEBRAIN, USA
First organized, formed or incorporated under the laws of <u>GEBRGIR</u> , <u>USA</u> (Enter state, or if a non-U.S. entity, the name of the country)
on 05/12/2016 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LIVE LIFE WITH WONDER LLC (Enter Name of Florida Limited Liability Company)
The effective on the date of filing, enter the effective date: 3/22/34. 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 locument'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 22 ^{Ld} day of MARCH	20_24	
Signature of Authorized Representative of Limit		
Signature of Authorized Representative: Printed Name: LOUISE TREVENA	Tredend. Title: MANAGER	 -
Signature(s) on behalf of Other Business Entity:		
Signature: Ne Cooperation of the		
Printed Name: Louise Trevera	Title: MANAGER	
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 Officers have not been selected, an Inc		6
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	CABI CABI TALLA
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	AY-8
All others: Signature of an authorized person.		PHID: PHID:
Fees:		0
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

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
LIVE LIFE WITH (Must contain the words "Limited Liability	WONDER LLC (Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
SOLPENMAN ROAD NEPTUNE BEACH FL 32266 ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	SOI PENMAN ROAD NEPTUNE BEACH F-L 32266 Office, & Registered Agent's Signature: and Agent. You must designate an individually another
The name and the Florida street address of the re	egistered agent are:
Name SOI PENMAN Florida street address (P.O. NE PTUNE REAC City	POAD Box NOT acceptable) ROAD Box NOT acceptable)
Having been named as registered agent and to	accept service of process for the above stated limited

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)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	LOUESE TREVENA
	SOI PENMAN ROAD
	NETVNE BEACH FL
	— •
	32266
(Use attachment if necessary)	
(Ose attachment if necessary)	
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CLE V: Other provisions, if any.	
OBB VI other provisions, it any.	
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Signature of a member or a	n authorized representative of a methor
Signature of a member or at	n authorized representative of a member
This document is executed in accordance w	n authorized representative of a member vith section 605.0203 (1) (b), Florida Statutes, I am aware that
This document is executed in accordance w	n authorized representative of a member
This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ent to the Department of State constitutes a third degree felony
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