L24000390918

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

Division of Corporations SUBJECT: INduction AESThetics
SUBJECT. INDUCTION AECTHOLICS
SUBJECT: TOURS COLOR TIES CHIC DIES
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
And Fox
(Contact Person)
Induction AEsthetics
(Firm/Company)
525 3rd Street N. Apt. 409
(Address)
Ann A Fox (Contact Person) Induction AESthetics (Firm/Company) 525 3rd Street N, Apt. 409 (Address) Taeksonville Beach, FL 32250 (City, State and Zip Code) Induction Aesthetics a gmail. com E-mail Address: (to be used for future annual report notifications)
(City, State and Zip Code)
Induction Aesthetics @ gmail.com
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
ANNA FOX at (904) 655 - 1966 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
☐ \$150.00 Filing Fees ☐\$155.00 Filing Fees ☐\$180.00 Filing Fees,
(\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and
& \$125 for Articles Status of Organization) Status of Status of Status of Status Of \$52.50 Of \$52.50 Status of Status Of \$52.50
of \$52 ³⁰)
<u>Street Address:</u>
New Filing Section New Filing Section Division of Corporations Division of Corporations
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



August 1, 2024

ANNA FOX INDUCTION AESTHETICS 525 3RD STREET N APT 409 JACKSONVILLE BEACH, FL 32250

SUBJECT: INDUCTION AESTHETICS CORP

Ref. Number: P24000040219

We have received your document for INDUCTION AESTHETICS CORP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction may not be filed to change from a Corporation to an LLC. If you want to file as a LLC I have enclosed the The Articles of Conversion. The conversion would make the Corporation Inactive and then file the New LLC. NOTE: There is an additional filing fee \$97.50 you have a credit of \$52.50

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

SEP DY 202"

Letter Number: 724A00017110

FILED

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TALLAHASSEE, FLORIDA

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.

INDUCTION AESTHETICS. SORP.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity, the name of the country)
on O6/11/2024 (P24000040219) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
INDUCTION AESTHETICS LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: <u>09/01/2024</u> . (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 alon of conversion has been emproved in accordance with all applicable statutes

- 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 30th day of August	20 <u>d4</u>	
Signature of Authorized Representative of Limit	ed Liability Company:	
Signature of Authorized Representative: Printed Name: ANNA FOX	Title: OWNER	
Signature(s) on behalf of Other Business Entity: [5]	See below for required signature(s)	
Signature: Ahna The York Printed Name: ANNA FOX		
Printed Name: 41 NNA FOX	Title: OWNER	
Signature:		
Signature:Printed Name:	_ Title:	
Signature:		
Signature: Printed Name:	Title:	
Signature:		以 26
Signature:Printed Name:	_ Title:	11. 14. S. ¥(S.
Signature		0024 SEP -9
Signature:Printed Name:	Title:	38.5 6
Signatura		PR PR
Signature:Printed Name:	Title:	G ₂
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer.	RIDA RIDA
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	v Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
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 I - Name:

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>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	ANNA FOX 525 3Rd St. N. Apt. 409 Jacksonville Beach, FL
	32250
	ZN24 SE
	SSEC.
(Use attachment if necessary)	FLORE
ICLE V: Other provisions, if any.	7

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)