L24000483122

(Req	uestor's Name)	
(Add	ress)	
,	·	
(1.11)		
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
/Bus	iness Entity Nan	no)
. (Dus	mess Entity Ivan	ne,
(Doc	ument Number)	_
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only



400425204094

03/08/24 -01030--004 **155.00

EATLAHASSEE, FLORIDA

24 MAR -8 AM 3: 12





FLORIDA DEPARTMENT OF STATE Division of Corporations

April 1, 2024

ROBERTO L ESTEVEZ 12555 SW 189 ST MIAMI, FL 33177 US

SUBJECT: VICE DESIGNS INC Ref. Number: W24000051700

We have received your document for and your check(s) totaling \$155,000 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.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 924A00006909

COVER LETTER

TO:	New Filing Se Division of C				
en ro	JECT: VICE DE	•			
SUB	JEC1:	(Name of Res	ulting Florida Limit	ed Com	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this matter to:		
ROBE	ERTO L ESTEVE	Z			
_		(Contact Person)			
		(Firm/Company)			
12555	5 SW 189 STREE				
ΜΙΔΑ	11, FL 33177	(Address)			
		City, State and Zip Code)		-	
E-	mail Address: (to h	e used for future annual re	port notifications)		
For f	urther informati	on concerning this ma	tter, please call:		
ROB	ERTO L. ESTEVE	Z	_at (⁷⁸⁶)2553	
	(Name of Conta	act Person)	(Area Code)	(Day	rtime Telephone Number)
		for the following amous a hank located in the		roces	sed by this office must be payable in US
(\$25 f & \$12	50.00 Filing Fees for Conversion 25 for Articles ganization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cor		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 27		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

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 Articles of Conversion is: VICE DESIGNS INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION (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)
05/20/2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: VICE DESIGNS 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 th	is 14TH	day of FEBRUARY	20	.
<u>Signatur</u>	e of Authori	zed Representative o	f Limited L	<u> Liability Company:</u>
Signature Printed N	of Authorize ame: ROBER1	ed Representative: TO L. ESTEVEZ	Tit	le: PRESIDENT
Signature	e(s) on behalf	f of Other Business Er	<u>ıtity:</u> [See l	below for required signature(s)
Cianatura		128		
Printed N	ame: Robe	Mo L. Esteva	Tit	le: <u>President</u>
Signature	:			le:
Printed N	ame:		I it	le:
Signature:	:		70%	de:
rinica N	ame:		111	
Signature			eps.	ile:
Printed N	ame:		11	(le:
Signature Printed N	:		Tir	tle:
Signature	:			tle:
rtineu N	aute.		1 n	
	<u>a Corporatio</u> of Chairman	<u>n:</u> . Vice Chairman, Direc	tor, or Offic	ег <i>.</i>
		have not been selected		
	a General Pa of one Gener	rtnership or Limited ral Partner.	Liability Pa	artnership:
		rtnership or Limited ineral Partners.	<u>Liability Li</u>	mited Partnership:
All other Signature	<u>s:</u> of an authori	zed person.		
Fees:				
Fo C	rticles of Colees for Florid ertified Copy ertificate of S	la Articles of Organiza	tion: \$12 \$30	5,00 25,00 0.00 (Optional) 00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

. nome of the total	
ARTICLE I - Name: The name of the Limited Liability Compan	v is:
The hame of the Elimited Elability Company	y 13.
VICE DESIGNS LLC	
	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12555 SW 189 STREET	12555 SW 189 STREET
MIAMI, FL 33177	MIAMI, FL 33177
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of	the registered agent are:
ROBERTO L. ESTEVEZ	
	Name
12555 SW 189 STREET	
Florida street address	(P.O. Box <u>NOT</u> acceptable)
MIAMI	FL 33177
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)

ARTICLE IV-

ROBERTO L. ESTEVEZ

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	ROBERTO L. ESTEVEZ 12555 SW 189 STREET MIAMI, FL 33177
(Use attachment if necessary)	
LE V: Other provisions, if any,	
REQUIRED SIGNATURE:	2
This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felorical section.

Typed or printed name of signee

Filing Fees

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

\$ 5.00 Certificate of Status (Optional)