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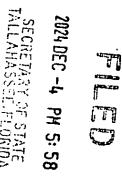
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Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:	New Filing S Division of C				į		
SHR.	JECT: BAHKAN	NO AESTHETICS LLC					
ООВ	,EC1.	(Name of Re	sulting Florida Li	mited Co	ompany)		
					nd fees are submitted to accordance with s. 605		ther
Pleas	e return all corr	espondence concernin	g this matter to):			
JULIO	O SANTOS DE-S	ото					
	,,,	(Contact Person)		_			
BAH	KANO AESTHET	ICS LLC					
		(Firm/Company)					
2150	N BAYSHORE D	RIVE APT 603					
		(Address)					
MIAN	II, FL 33137						
	((City, State and Zip Code)	_				
julioa	santos@gmail.co	om					
E-1	mail Address: (to b	e used for future annual re	port notifications)			
For fu	urther informati	on concerning this ma	tter, please cal	1:			
JULIO	SANTOS DE-S	ото	at (224	ຸ628	-3944		
	(Name of Conta	ict Person)		<u>/</u> de) (Da	ytime Telephone Number)	_	
		or the following amou a bank located in the		-	ssed by this office must	t be payable in U	JS
(\$25 fd & \$12.	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fili and Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	ZOZY DEC -4	-779
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis	et Address: Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Sui	PH 5	

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:

BAHKANO AESTHETICS LLC
(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.
(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)
02/02/2021 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: BAHKANO AESTHETICS 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.

2024 DEC -4 PH 5: 58

Signed this 12TH day of NOVEMBER 2024	_ 20
Signature of Authorized Representative of Limite	ed Liability Company:
Signature of Authorized Representative: Printed Name: JULIO SANTOS DE-SOTO	Title: MANAGING MEMBER
Signature(s) on behalf of Other Business Entity: S	
Signature: JULIO SANTOS DE-SOTO	Title: MANAGING MEMBER
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or O If Directors or Officers have not been selected, an Inco	
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:
All others:	

All others:
Signature of an authorized person.

Fees:

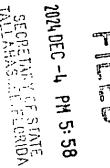
Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

\$30.00 (Optional) \$5.00 (Optional)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
BAHKANO AESTHETICS LLC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC,")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Compar	ıy is:

Principal Office Address:	Mailing Address:
2309 S Cypress Bend Drive Apt 211-A	2150 N Bayshore Drive Apt 603
Pompano Beach, FL 33069	MIAMI, FL 33137

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

ARTICLE I - Name:

City	Zip
MIAMI	FL 33137
Florida street address (P	O. Box NOT acceptable)
2150 N BAYSHORE DRIVE	E APT 603
Na	me
JULIO SANTOS DE-SOTO	·

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..

Signature (BEOURED

(CONTINUED)

Agent's

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	DE-COTUAN OLJUL OTOS-BOOTHAS OILUL
	2150 N BAYSHORE DRIVE APT 603
	MIAMI, FL 33137
	
	<u> </u>
Use attachment if necessary)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
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REQUIRED SIGNATURE: Signature of a member	or an authorized representative of a member
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Signature of a member This document is executed in accordany false information submitted in a d as provided for in s.817.155, F.S.	or an authorized representative of a member ance with section 605.0203 (1) (b). Florida Statutes. I am aware that document to the Department of State constitutes a third degree felony
Signature of a member This document is executed in accordany false information submitted in a d as provided for in s.817.155, F.S.	or an authorized representative of a member ance with section 605.0203 (1) (b). Florida Statutes. I am aware that document to the Department of State constitutes a third degree felony Santos - De So70
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