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H/11.24

(Requestor's Name)
(Address)
(Address)
(,
(City/State/Zip/Phone #)
(Oity/State/Zipir-none #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certificates of States
Special Instructions to Filing Officer:
Rec 12.10.24
(150) 5)
WZ4000150977

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 7, 2024

KEVA TRANZOR 5327 ENTERTAINMENT WAY FORT PIERCE, FL 34947 US

SUBJECT: SCARLET SPINDLE LLC Ref. Number: W24000150977

We have received your document for SCARLET SPINDLE LLC and check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

Matthew H Hitchcock Regulatory Specialist II

Letter Number: 424A00024535



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees: \$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address:

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

Street Address:

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

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605.0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)

COVER LETTER

TO: New Filing Sect Division of Coπ					
SUBJECT: SCARLETS	SPINDLE, LLC				
30BJEC1	(Name of Res	ulting Florida Limi	ed Con	npany)	
		_		nd fees are submitted to con ecordance with s. 605.1045	
Please return all corresp	ondence concernin	g this matter to:			
KEVA TRANZOR					
	Contact Person)		-		
SCARLET SPINDLE, LLC	:				
	Firm/Company)	···	-		.•
5327 ENTERTAINMENT	WAY				24 24
-	(Address)		-		음 5월
FORT PIERCE, FL 34947					0-6
	, State and Zip Code)				3. X
KEVA.TRANZOR@GMAI	•				1 19 19 19 19 19 19 19 19 19 19 19 19 19
E-mail Address: (to be us		port notifications)	•		SECRETARY OF STATE 24 DEC -6 AM 12: 14
					
For further information	concerning this ma	-			<i>A</i>
KEVA TRANZOR		_at (<u>814</u>)206-4	4884	
(Name of Contact F	'erson)	(Area Code)	(Day	rtime Telephone Number)	
Enclosed is a check for dollars and drawn on a b	_		rocess	sed by this office must be p	ayable in US
(\$25 for Conversion ar	\$155.00 Filing Fees and Certificate of atus	□\$180.00 Filing and Certified Cop		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address	s:		Street	t Address:	
			New 1	Filing Section	
				ion of Corporations	
P.O. Box 6327		The C	Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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: "IT IS FINISHED!" CLEANING SERVICE, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY CORPORATION (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.
PENNSYLVANIA First organized formed or incorporated under the laws of
First organized, formed or incorporated under the laws of
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: SCARLET SPINDLE, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 11/18/2024 (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 this 25TH day of OCTOBER	20		
Signature of Authorized Representative of Lim			
Signature of Authorized Representative:			
Signature of Authorized Representative:	The DESCRIPTION OF THE PROPERTY OF THE PROPERT		
Printed Name: KEVA TRANZOR	Title: PRESIDENT		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature: Wary le WM			
Printed Name: VAUGHN WILSON	Title: VICE-PRESIDENT		
Signature:			
Printed Name:	Title:		
Signature:Printed Name:			
Printed Name:	Title:		
C'			
Signature:Printed Name:	Title		
Printed Name.			
Signature			
Signature:Printed Name:	Title:		
Timed (value)			
Signature:			
Printed Name:	Title:		
If Florida Corporation:			
Signature of Chairman, Vice Chairman, Director, or	Officer.		
If Directors or Officers have not been selected, an In-	corporator must sign.		
If Florida General Partnership or Limited Liabili	ty Partnership:		
Signature of one General Partner.			
PCTS - 2.1 - F 1 - 24 - 1 D - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	And I for the different countries.		
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:		
Signatures of <u>ALL</u> General Partners.			
All others:			
Signature of an authorized person.			
Signature of all authorized person.			
Fees:			
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 ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
SCARLET SPINDLE, LLC			
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
5327 ENTERTAINMENT WAY	1717 ORANGE AVE #54		
FORT PIERCE, FL 34947	FOR PIERCE, FL 34950		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the results	red Agent. You must designate an individual or another		
KEVA TRANZOR			
Name			
5327 ENTERTAINMENT WAY			
Florida street address (P.O.	Box NOT acceptable)		
FORT PIERCE	FL 34947		
City	Zip		
Harris Landau I and a defendant to the	annet marine of many for the above stated limit		

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>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	KEVA TRANZOR
	5327 ENTERTAINMENT WAY
	FORT PIERCE, FL 34947
AMBR	VAUGHN WILSON
	5327 ENTERTAINMENT WAY
	FORT PIERCE, FL 34947
	2
	<u> </u>
	1 3
(Use attachment if necessary)	^-
	AH 12:
ARTICLE V: Other provisions, if any.	2: #35 >5
ARTICLE V: Other provisions, if any.	- 100 inc
DEALIDED CLOVATURE.	
REQUIRED SIGNATURE:	1
David J	her.
	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that
any false information submitted in a docum as provided for in s.817.155, F.S.	nent to the Department of State constitutes a third degree felony
KEVA TRANZOR	

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)