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(Re	questor's Name)			
(Address)				
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(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filling Officer:			

Office Use Only



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10/25/24--01024--009 **185.00

ALCREDARY OF STATE

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October 30, 2024

KELLY CASTILLO 4593 BUCIDA RD BOYNTON BEACH, FL 33436 US

SUBJECT: DREAM BODY INC Ref. Number: W24000147508

We have received your document for 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.

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

Letter Number: 024A00023934

KAIN COSTELLO Regulatory Specialist II New Filing Section

RECEIVED 124-NOV 18 PM 2: 50 COST PM 2: 50

COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: Dream Body INC (Name of Resulting Florida Limited Company)					
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.					
Please return all correspondence concerning this matter to:					
Kelly Castillo					
Dream Body Inc					
4593 Bucida Rd					
Boynton Beach, FL 33436 (City, State and Zin Code)					
E-mail Address: (to be used for fintire amount report notifications)					
For further information concerning this matter, please call:					
$\frac{\text{Rely (astillo)}}{\text{(Name of Contact Person)}}$ at $(\frac{786}{\text{(Area Code)}})$ (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)					
S150.00 Filing Fees (\$25 for Conversion & and Certificate of & Status S155.00 Filing Fees and Certified Copy & Certified Copy, and Certificate of Status S160.00 Filing Fees & Certified Copy, and Certificate of Status					

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.

- 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 ZZ day of October	20_24			
Signature of Authorized Representative of Limited Liability Company:				
Signature of Authorized Representative: Printed Name: Kelly Cashlo	Title: 10wner			
Signature(s) on behalf of Other Business Entity: [
Signature: Printed Name: Kely Jashilo	Title: President			
Signature:				
Signature:Printed Name:				
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.	Officer.			
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:			
All others: Signature of an authorized person.				
<u>Fees:</u>				
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:

The name of the Limited Liability Company is:

Dream Booly 2 Beauty 110 (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 Company is:
Principal Office Address: Mailing Address:
4593 Bucida 10 Same Boynton Beach, FL 33436
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: Cash Cosh Cosh
Florida street address (P.O. Box <u>NOT</u> acceptable)
Boynton Boach FL 33436 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

(CONTINUED)

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

Title: "AMBR" = Authorized Member "MGR" = Manager AMBR	Name and Address:		
	Kelly Cashillo 4597 Birida 1d Boynton Beach FL 33436.		
			
			
(Use attachment if necessary)			
ARTICLE V: Other provisions, if any.			
REQUIRED SIGNATURE:	elle C		
Signature of a member or an	authorized representative of a member		
This document is executed in accordance wit	h section 605,0203 (1) (b), Florida Statutes, I am aware that to the Department of State constitutes a third degree felony		
Kelly Cas	5+11n		
Typed	or printed name of signee Filing Fees		
\$125.00 Filing Fee for Articles of O	Organization and Designation of Registered Agent		
S 30.00 Certified Copy (Optional)	S 5.00 Certificate of Status (Optional)		