#P11000096277

(Requestor's Name)				
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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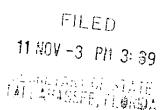
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KSALY EXAMINER NOV 4 2011

COVER LETTER

TO:	Registration Division of C				
SUBJ	ECT: Pastry				
		Name of F	Resulting Florida Profit	Corporation	
		cate of Conversion, Arity" into a "Florida Pro			submitted to convert an s. 607.1115, F.S.
Please	return all corr	espondence concernin	g this matter to:		
Jenny	Rissone				
		Contact Person			
Pasti	ry is Art, LL				
		Firm/Company			
12591	l Biscayne Blv	/d.			
		Address			
North	Miami, FL 3	2181			
1401111	THE WAR	City, State and Zip Code			
	mail address: (to	be used for future annual r	enort notification)		
			•		
For Iu	rther informati	on concerning this ma	tter, please call:		
Jenny	Rissone		~·· \/	603-9340	
	Name of Con	tact Person	Area Code and D	aytime Telephone N	umber
Enclos	sed is a check f	for the following amou	nt:		
☑ \$105	5.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	☐\$113.75 Filing Fee and Certified Copy	Certificate of S	, and
STREET ADDRESS:			G ADDRESS:		
Registration Section		Registration Section			
Division of Corporations Clifton Building		Division of Corporations P. O. Box 6327			
2661 Executive Center Circle		Tallahassee, FL 32314			
	assee, FL 3230		i wiiwiiwii	,	

Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation



This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
Pastry is Art, LLC #L09000/01469
Enter Name of Other Business Entity
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
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 October 15 2009
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Pastry is Art, Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this 31 day of October	, 20_11
Required Signature for Florida Profit Corporat	
	nis document are true. Any false information constitutes
a third degree felony as provided for in s.817.155,	F.S.
Signature of Chairman, Vice Chairman, Director, 1	Officer, or, if Directors or Officers have not been
selected, an Incorporator:	2
	October 31, 2011
D 1 101 () () 1 1 10 10 1 D 1	
	s Entity: Individual(s) signing affirm(s) that the facts
	tion constitutes a third degree felony as provided for in
s.817.155, F.S. [See below for required signature(s).	
Signature:	
Printed Name: Jenny Rissone	Title: October 31, 2011
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	T'-1
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
Signature of one General Partitles.	·
<u>If Florida Limited Partnership or Limited Liabilit</u>	y Limited Partnership:
Signatures of ALL General Partners.	
If Florida Limited Liability Company:	
Signature of a Member or Authorized Representative	
_	
All others:	
Signature of an authorized person.	
Fees:	
Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)
	• •

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TILED

	AME	11 %	OV -3 PM 3:39
The name of the corpo	pration shall be: Pastry is Art, Inc.	1 61 : 1	WARTER CLARE
ARTICLE II PI	RINCIPAL OFFICE	total a	MASSEE, FLORING
	Principal street address	Mailing address, if	lifferent is:
12591 Bisca	lyne Blvd		
North Miami F	L 33181		
ARTICLE III PU The purpose for which	TRPOSE h the corporation is organized is:		
To conduct any la	wful and legal business		
The number of shares	100		
	IITIAL OFFICERS AND/OR DIRECT		
Address:	Jenny Rissone, President 12591 Biscayne Blvd	Name and Title:	
	North Mami El 33181	Address.	
	TOTAL MARKET C 35101		
Name and Title:		Name and Title:	
Address:			
		Name and Title:	
Address:		Address:	· · · · · · · · · · · · · · · · · · ·
		Jenny Rissone	
•			
	EGISTERED AGENT		
Name:	a street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Address:	Jenny Rissone 12591 Biscayne Blvd		
Audress.	North Migml FL 33181		
	TOTAL MAINING COSTO		
ARTICLE VII IN	CORPORATOR		
The name and addres	s of the Incorporator is:		
Name:	Jenny Rissone	T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
Address:	112591 Biscayne Blvd	· · · · ·	
	North Miami FL 33181		
Having been named a this certificate, I am fa	is registered agent to accept service of pro amiliar with and accept the appointment as	cess for the above stated corporation at registered agent and agree to act in this	the place designated in capacity
() Dance		10/31/2011	
Danisad	Signature/Pagistared Asset		
required	Signature/Registered Agent	Date	
I submit this documer	nt and affirm that the facts stated herein	are true. I am aware that any false info	rmation submitted in a
document to the Pepa	rtment of State constitutes a third degree fe	dony as provided for in s.817.155, F.S.	
/ /			