

PS000044357

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

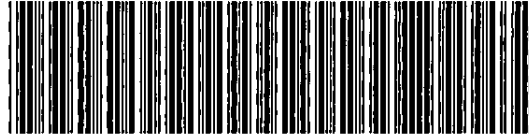
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/15/15--01021--002 **35.00

05/15/15--01021--001 **70.00

FILED
15 MAY 15 AM 10:40
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: The Local Brand Inc.

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Teng Tran

Contact Person

Rocket Lawyer

Firm/Company

5668 E 61st St

Address

Commerce CA 90040

City, State and Zip Code

CONTACT@SHELLIESTYLE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Teng Tran

Name of Contact Person

at (800) 462-5487 x133

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$105.00 Filing Fees

☐ \$113.75 Filing Fees
and Certificate of
Status

☐ \$113.75 Filing Fees
and Certified Copy

☐ \$122.50 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

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

This Certificate of Conversion **and attached Articles of Incorporation** 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:

THE LOCAL BRAND LLC

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 **02/24/2015**
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:**

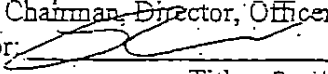
The Local Brand Inc.

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.)

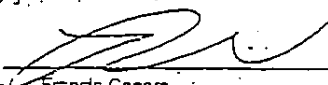
Signed this 5th day of May, 2015

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: 

Printed Name: Francis Cecere Title: President

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: 
Printed Name: Francis Cecere Title: Member

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability 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)

ARTICLE I NAME

The name of the corporation shall be: The Local Brand Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

2727 rosemary ave, Bay 12
west palm beach FL 33407

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wholeselling and retailing our product Nation Wide

ARTICLE IV SHARES 100 with \$0.01 par value

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Francis Cecere, Director

Address: 2727 rosemary ave, Bay 12
west palm beach FL 33407

Name and Title: Christopher Lamb, Director

Address: 1601 S. E. Flintlock Rd.
Port St Lucie, FL 34952

Name and Title: Matthew Lilly, Director

Address: 2607 Exuma Rd
West Palm Beach FL 33406

Name and Title: _____

Address: _____

Name and Title: Jorge Lopez, Director

Address: 13700 SW Groveside Dr
Indiantown FL 34956

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Francis Cecere

Address: 2727 rosemary ave, Bay 12
west palm beach FL 33407

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Teng Tran
Address: 5668 E 61st St
Commerce CA 90040

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

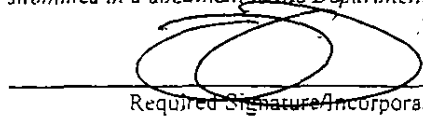


Required Signature/Registered Agent

5/5/2015

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

5/5/2015

Date

FILED
15 MAY 15 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA