

P16000083930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

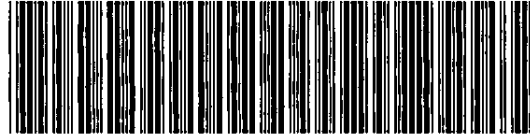
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~W16-53133~~
WRONG FORM

Office Use Only



800286933178

07/22/16--01022--002 **25.00

09/28/16--01024--012 **18.75

10/19/16--01006--003 **71.25

FILED
2016 OCT 17 AM 9:47
CLERK OF COURT
TALLAHASSEE, FLORIDA

V HERRING
OCT 19 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DESIGNER CAKES & DESSERTS LLC

Name of Florida Limited Liability Company

The enclosed Articles of Conversion and fee(s) are submitted to convert a Florida Limited Liability Company" into an "Other Business Entity" in accordance with s.605.1045, F.S.

Please return all correspondence concerning this matter to:

MICHELLE (SHELLY) CHANDLER

Contact Person

DESIGNER CAKES & DESSERTS LLC

Firm/Company

1424 ROGERS ST

Address

CLEARWATER, FL 33756

City, State and Zip Code

designercakesofcw@gmail.com

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

For further information concerning this matter, please call:

MICHELLE (SHELLY) CHANDLER

Name of Contact Person

at (727) 776-5989

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee
and Certificate of
Status

☐ \$55.00 Filing Fee
and Certified Copy

☐ \$60.00 Filing Fee,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

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

MAILING ADDRESS:

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

CR2E106 (07/14)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2016

MICHELLE (SHELLY) CHANDLER
1424 ROGERS ST
CLEARWATER, FL 33756

SUBJECT: DESIGNER CAKES & DESSERTS LLC
Ref. Number: W16000053133

We have received your document for DESIGNER CAKES & DESSERTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The correct forms are enclosed.

Please return the corrected original and one copy of 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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 516A00016054

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

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2016 OCT 17 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

DESIGNER CAKES & DESSERTS LLC

L14-150852

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC

(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 09/26/2014

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:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

DESIGNER CAKES & DESSERTS INC

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 09/15/2016

(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.)

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.

Signed this 8TH day of SEPTEMBER, 2016.

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: MICHELLE CHANDLER Title: PRESIDENT

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

Signature: _____

Printed Name: MICHELLE CHANDLER Title: MANAGING MEMBER

Signature: _____

Printed Name: SARAH LA BELLE Title: MEMBER

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)

~~PAID \$95~~

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2016 OCT 17 AM 9:47
TALLAHASSEE, FLORIDA

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: DESIGNER CAKES & DESSERTS INC

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal street address
100 MAIN STREET, SUITE 103,
SAFETY HARBOR, FL 34695

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LEGAL ACTIVITIES

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHELLE "SHELLY" CHANDLER, PRE

Address: 1424 ROGERS STREET
CLEARWATER, FL 33756

Name and Title: _____

Address: _____

Name and Title: SARAH LA BELLE, VICE PRES

Address: 605 S. MARTIN LUTHER KING JR
CLEARWATER, FL 33756

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: MICHELLE CHANDLER
Address: 100 MAIN ST SUITE 103
SAFETY HARBOR, FL 34695

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2016 OCT 17 AM 9:47

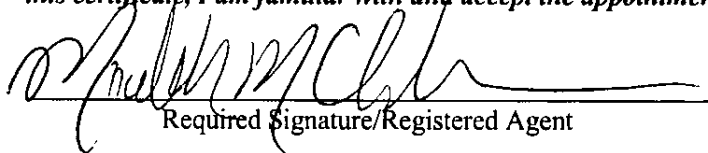
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

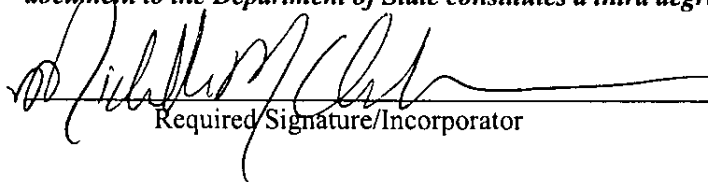
Name: MICHELLE CHANDLER
Address: 100 MAIN ST SUITE 103
SAFETY HARBOR, FL 34695

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

9/12/16
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

9/12/16
Date