# L24000312537

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PICK-UP WAIT MAIL
(Business Entity Name)
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# FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR

EXAMINER'S INITIALS:\_\_\_\_

(850) 491-9625 Brandon (850) 524-5437 Teresa

TALLAHASSEE, FL 323	809	(850) 524-6243 Rich
Please use funds for Authorization Sign		nt: 120210000160: \$180.00
Business Name: Document # _XCertified CopyCertificate of Stat		
NEW FILINGS Profit CorpNot for ProfitLimited LiabilityDomesticationLLLPCorpIncOther  APOSTILLE(s)Apostille(s)Country(s)	&	AMENDMENTS AmendmentResignation / DissociationChange of Registered AgentRevocation of DissolutionMergerX_Articles of ConversionAmended & Restated Articles of IncorporationStatement of Authority  OTHER FILINGSForeign FilingReinstatementQualificationFictitious NameAnnual Report

# FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR TALLAHASSEE, FL 32309

EXAMINER'S INITIALS:\_\_\_\_

(850) 491-9625 Brandon (850) 524-5437 Teresa (850) 524-6243 Rich

Please use funds f Authorization Sign		<u>nt:</u> 120210000160: \$180.00
Business Name: Document # _XCertified CopyCertificate of State	Bagsionist	ta LLC
NEW FILINGS	&	<u>AMENDMENTS</u>
Profit CorpNot for ProfitLimited LiabilityDomesticationLLLPCorpIncOther		AmendmentResignation / DissociationChange of Registered AgentRevocation of DissolutionMergerX_Articles of ConversionAmended & Restated Articles of IncorporationStatement of Authority
APOSTILLE(s)	&	OTHER FILINGS
Apostille(s) Country(s)		Foreign FilingReinstatementQualificationFictitious NameAnnual Report

## **COVER LETTER**

<b>TO:</b> New Filing Division of	Section Corporations					
SUBJECT: Bagsic	onista LLC					
SUBJECT:	(Name of R	esulting Florida Lin	nited Co	mpany)		
		_		nd fees are submitted to accordance with s. 605.		er
Please return all co	rrespondence concerni	ng this matter to				
Yaakov Klein						
	(Contact Person)					
Frankel, Rubin, Kleir	n, Payne & Pudlowski, P.	C.			2024	
	(Firm/Company)		_			i j
231 S Bemiston Ave	, Ste 1111					<u>्राज्यस्य</u> १०५५३ 
	(Address)		_			
Clayton, MO 63105					2024 JUL 16 KH 9: 47	
	(City, State and Zip Code)				<u> </u>	
yklein@frankelrubin.	com				1.1	
E-mail Address: (to	be used for future annual i	eport notifications)	_			
For further informa	tion concerning this m	atter, please call:	1			
Yaakov Klein		at ( 314	725-	8000		
(Name of Cor	ntact Person)		(Da	ytime Telephone Number)	_	
	for the following among a bank located in the	•	proces	sed by this office must	be payable in US	5
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Co	_	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status		
Mailing Ad New Filing Division of P.O. Box 63 Tallahassee	Section Corporations 327		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suit	te 810	

Tallahassee, FL 32303

#### **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 Bagsionista LLC	of Conv		15:
(Enter Name of Other Business Entity)		2024 JUL	
2. The "Other Business Entity" is a			1
2. The "Other Business Entity—is a		.ine3s tru	stlete
First organized, formed or incorporated under the laws of(Enter state, or if a non-U.S. entity, the na	<i>(</i> )	3	
(Enter state, or if a non-U.S, entity, the na	ime of the	còimiry	)
11/03/2023 on .	1 1	ĻŢ	
(date of organization, formation or incorporation)			
<ol> <li>The name of the Florida Limited Liability Company as set forth in the attached Article Bagsionista LLC</li> </ol>	es of Or	ganiza	tion:
(Enter Name of Florida Limited Liability Company)			
4. If not effective on the date of filing, enter the effective date:			
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 of 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 we 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.

DUCUSIQUI CITYETUPE ILU. AZITZ TUCH-SITOU-40C7-0AZZ-TITOOSALILU7307 Signed this 15th day of July 20 24 . Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: 

| Uasker Elin | Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Nathalie Bauer Title: Manager Signature: Printed Name: Title: Signature: Printed Name:\_\_\_\_\_ Signature: Printed Name: Title: Printed Name: \_\_\_\_\_\_ Title: Printed Name: Title:

#### If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

# If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

# If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of <u>ALL</u> General Partners.

#### All others:

Signature of an 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

Bagsionista LLC			
(N)	lust contain the words "Limited Li	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - A The mailing addre		e principal office of the Limited Liability Compa	ıny is:
Principal Office	Address:	Mailing Address:	
3101 NE 1st Ave		3101 NE 1st Ave	
Apt 2615		Apt 2615 2	
Apt 2615 Miami, FL 33137 ARTICLE III - F	Registered Agent, Regist	Miami, FL 33137 == == == == == == == == == == == == ==	
Apt 2615 Miami, FL 33137  ARTICLE III - F (The Limited Liability Countries entity with an	Company cannot serve as its own Factive Florida registration.)  Florida street address of t	Miami, FL 33137  red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or anothers	
Apt 2615 Miami, FL 33137  ARTICLE III - F (The Limited Liability Countries entity with an	Company cannot serve as its own Factive Florida registration.)  Florida street address of t  InCorp Services, Inc.	Miami, FL 33137  ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or anothers the registered agent are:	Ü
Apt 2615 Miami, FL 33137  ARTICLE III - F (The Limited Liability Countries entity with an	Company cannot serve as its own Factive Florida registration.)  Florida street address of t  InCorp Services, Inc.	miami, FL 33137  red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or anothers	Ü
Apt 2615 Miami, FL 33137  ARTICLE III - F (The Limited Liability Countries entity with an	Company cannot serve as its own Factive Florida registration.)  Florida street address of t  InCorp Services, Inc.	Miami, FL 33137  ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or anothers the registered agent are:	Ü
Apt 2615 Miami, FL 33137  ARTICLE III - F (The Limited Liability Countries entity with an	Company cannot serve as its own Factive Florida registration.)  Florida street address of t  InCorp Services, Inc.  N  3458 Lakeshore Drive	Miami, FL 33137  ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or anothers the registered agent are:	Ü
Apt 2615 Miami, FL 33137  ARTICLE III - F (The Limited Liability Countries entity with an	Company cannot serve as its own Factive Florida registration.)  Florida street address of t  InCorp Services, Inc.  N  3458 Lakeshore Drive	Miami, FL 33137  Pred Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or anothers the registered agent are:	Ü

Amber Ragland on behalf of InCorp Services, Inc.

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	
MGR	Nathalie Bauer
	3101 NE 1st Ave, Apt 2615
	Miami, FL 33137
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<del></del>	
	<u> </u>
	<u> </u>
(Use attachment if necessary)	7-1
( o o o unucinition in the cession y )	
ICLE V: Other provisions, if any.	
1022 7. Other provisions, it diff.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	xcuSigned by:
-	
	AA-090747504D6
Signature of a member or a	an authorized representative of a member
any false information submitted in a document	with section 605,0203 (1) (b). Florida Statutes, I am aware that nent to the Department of State constitutes a third degree felony
as provided for in s.817.155, F.S.	near to the 19cparament of state constitutes a finite degree felony
-	
	Nathalie Bauer
Тур	ped 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)