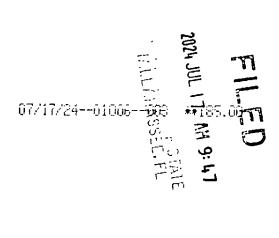
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(Requestor's Name)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
- Floredi Milita
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer
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- Office Use Only
· Office Use Only



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ALLAHASSEE, FLUGI

PECEIVED AMID: 28

COVER LETTER

TO: New Filing So Division of C							
	s Artistry Liberation Mo	tion Fe	eels Like One	e Way	, PLLC		
SUBJECT.	(Name of Res	sulting	Florida Limite	d Con	npany)	-	
					d fees are submitted to eccordance with s. 605,1		
Please return all corre	espondence concerning	g this	matter to:				
Charles Farrall							
	(Contact Person)					20	
Conscious Artistry Libe	eration Motion Feels Like	e One	Way, PLLC			7. 7.	;- 4
	(Firm/Company)						-
17796 SE 91st Freedo						2024 JUL 17 AH 9: 47	1
	(Address)					· 公 元	3
The Villages, FL 32162	2					9	
	City, State and Zip Code)					구절 5	
cfarrall416@gmail.com	• •					1.4	
E-mail Address: (to be	c used for future annual re	port no	tifications)				
For further information	on concerning this ma	tter, p	lease call:				
Charles Farrall		_at (_	833	968-3	3569		
(Name of Conta	et Person)	(_	(Area Code)	(Day	time Telephone Number)	-	
	or the following amou a bank located in the		_	ocess	ed by this office must b	oe payable in US	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		80.00 Filing F Certified Copy		S185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Addr New Filing Se Division of Co P.O. Box 632	ection orporations		ì I	New I Divisi	Address: Filing Section on of Corporations centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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 Ar Conscious Artistry Liberation Motion Feels Like One Way, PLLC	ticles of Conversion is:
(Enter Name of Other Business Entity)	2024
The "Other Business Entity" is a professional limited liability company	; (- <u>,</u> -)
(Enter entity type. Example: corporation, limited partnership, general partnership, con	nmon law or business trust, etc.
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity,	
10/06/2020 on	9:4
(date of organization, formation or incorporation)	- m
3. The name of the Florida Limited Liability Company as set forth in the attached A Conscious Artistry Liberation Motion Feels Like One Way, PLLC	articles of Organization:
(Enter Name of Florida Limited Liability Company)	 '
4. If not effective on the date of filing, enter the effective date:	<u></u> .
(The effective date: Cannot be prior to date of receipt or filed date nor more tha	n 90 calendar days after
the date this document is filed by the Florida Department of State.)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statute	es.

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 16 day	y of July	20 24	
Signature of Authorized	Representative of 1	Limited Liability Company:	
Signature of Authorized R Printed Name: Charles D. F	epresentative:	Title: Owner	_
		t <u>y:</u> [See below for required signature(s)]	
Signature:Printed Name:	SPICS DIAGO	L Title: ON NOCE	_
			~-3
		Title:	2024
Signature:Printed Name:		Title:	JUL 17
		Title:	. · ·
Signature:Printed Name:		Title:	一門一
Signature:		Title:	_
		Title	-
If Florida Corporation: Signature of Chairman, Vic If Directors or Officers hav			
If Florida General Partne Signature of one General P		ability Partnership:	
If Florida Limited Partne Signatures of <u>ALL</u> General		bility Limited Partnership:	
All others: Signature of an authorized	person.		
Fees:			
Articles of Conver	sion:	\$25.00	

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Coi	mpany is:		
Conscious Artistry Liberation Motion Fee	ls Like One Way, PLLC		
(Must contain the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address	s of the principal office of the Limited	l Liability Co	
Principal Office Address:	Mailing Address:		1024 JU

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 of another business entity with an active Florida registration.)

1576 Bella Cruz Drive

Lady Lake, FL 32159

Suite 120

The name and the Florida street address of the registered agent are:

ARTICLE I - Name:

17796 SE 91st Freedom Court

The Villages, FL 32162

Charles D. Farrall		
Nam	e	
17796 SE 91st Freedom Cou	rt	
Florida street address (P.O. Box NOT acceptable)		
The Villages	FL 32162	
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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager				
MGR	Charles D. Farrall			
	17796 SE 91st Freedom Court			
	The Villages, FL 32162			
				
	2024 JUL			
	MA 9.			
	مِ ــــــــــــــــــــــــــــــــــــ			
(Use attachment if necessary)				
• ,				
RTICLE V: Other provisions, if any.				
nscious Artistry Liberation Motion Feels Like	One Way, PLLC (EIN #85-3468367)			
	uding massage and martial arts/fitness instruction.			
	3			
				
DEAUIDED CICNATURE.	~1 ~			
REQUIRED SIGNATURE:				
52				
6.2				
	r an authorized representative of a member			
This document is executed in accordance	the with section 605.0203 (1) (b), Florida Statutes. I am aware that			
any false information submitted in a doc as provided for in s.817.155, F.S.	ument to the Department of State constitutes a third degree felony			
as provided for in s.817.155, F.S.				
Charles D. Farrall				
	vped 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)