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(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2024 DEC 30 PM 3:47

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CR SUNSETS INC

Please Debit FCA000000003 For: 105

Thank you Seth Neeley



2024 DEC 23 5:47

_____	Art of Inc. File_____
_____	LTD Partnership File_____
_____	Foreign Corp. File_____
_____	L.C. File_____
_____	Fictitious Name File_____
_____	Trade/Service Mark_____
_____	Merger File_____
_____	Art. of Amend. File_____
_____	RA Resignation_____
_____	Dissolution / Withdrawal_____
_____	Annual Report / Reinstatement_____
_____	Cert. Copy_____
_____	Photo Copy_____
_____	Certificate of Good Standing_____
_____	Certificate of Status_____
_____	Certificate of Fictitious Name_____
_____	Corp Record Search_____
_____	Officer Search_____
_____	Fictitious Search_____
_____	Fictitious Owner Search_____
_____	Vehicle Search_____
_____	Driving Record_____
_____	UCC 1 or 3 File_____
_____	UCC 11 Search_____
_____	UCC 11 Retrieval_____
_____	Courier_____

Signature

Requested by:

Name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** CR Sunsets, Inc

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Sylvia Mullen

Contact Person

CR Sunset LLC

Firm/Company

1501 Villa Juno Drive North

Address

Juno Beach, Florida 33408

City, State and Zip Code

adjmullen@gmail.com

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

For further information concerning this matter, please call:

Sylvia Mullen at ( 754 ) 264-9032

Name of Contact Person

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

**Mailing Address:**

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

**Street Address:**

New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

2024 DEC 30 PM 3:47

**Articles of Conversion**  
For  
**Converting Eligible Entity**  
Into  
**Florida Profit Corporation**

The Articles of Conversion **and attached Articles of Incorporation** are submitted to convert the following **eligible business entity into a Florida Profit Corporation** in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

CR Sunsets, LLC

Enter Name of the Converting Entity

2. The converting 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 02/22/2021  
Enter date "Converting Entity" was first organized, formed or incorporated.

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

CR Sunsets, Inc

Enter Name of Florida Profit Corporation

4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_.

(The effective date: **Cannot be prior to nor more than 90 days after 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 will not be listed as the document's effective date on the Department of State's records.

2021 FEB 22 PM 3:47

Signed this 22 day of December, 202024.

**Required Signature for Florida Profit Corporation:**

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

Signed by:

Sylvia Mullen

1A044D3AA10B4BB

Printed Name: Sylvia Mullen Title: President

**Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies:** [See below for required signature(s).]

Signed by:

Signature:

Sylvia Mullen

1A044D3AA10B4BB

Printed Name: Sylvia Mullen Title: Authorized 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:**

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

2024 DEC 22 PM 3:47

**ARTICLES OF INCORPORATION  
FOR RESULTING FLORIDA PROFIT CORPORATION  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)**

**ARTICLE I    NAME**

The name of the corporation shall be: CR Sunsets, Inc

**ARTICLE II    PRINCIPAL OFFICE**

The principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

1208 Marine Way  
North Palm Beach, FL 33408

1208 Marine Way  
North Palm Beach, FL 33408

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

Any and all legal business transactions.

**ARTICLE IV    SHARES**

The number of shares of stock is: 100

**ARTICLE V    OFFICERS AND/OR DIRECTORS**

Name and Title: Sylvia Mullen    P.

Address: 1208 Marine Way  
North Palm Beach, FL 33408

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: Sylvia Mullen

Address: 1208 Marine Way

North Palm Beach, FL 33408

\*\*\*\*\*

*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*

Signed by:

Sylvia Mullen

Required Signature/Registered Agent

12/22/2024

Date

2024  
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22  
3:17 PM