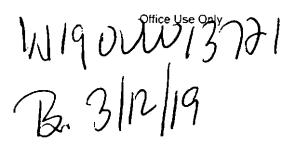
P190000306

(Reque	stor's Name)	
(Addres	es)	
(Addres	 ss)	
(City/Si	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
		
(Dural au	- Fait Man	
(Busine	ess Entity Name)	
(Docum	nent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filir	ng Officer:	
	,g Gillesi.	
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February 12, 2019

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PEC CHAMBERS 5060 W COLONIAL DR STE 113 ORLANDO, FL 32808

SUBJECT: T.F.C. TILE AND STONE INC

Ref. Number: W19000013721

We have received your document for T.F.C. TILE AND STONE INC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Letter Number: 919A00002969

Tyrone Scott Regulatory Specialist II New Filings Section

www.sunbiz.org

COVER LETTER

TO: Charter Section

Tallahassee, FL 32301

Division of Cor					
SUBJECT: T.F.C Tile a	nd Stone Inc				
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of	Resulting Florid	a Profit	Corporation	
	e of Conversion, Articles Profit Corporation" in ac			res are submitted to convert an "Ol 15, F.S.	her Business
Please return all corresp	ondence concerning this	s matter to:			
PEC Chambers					
	Contact Person		-		
ATP Business Solutions I	ne				
	Firm/Company	-	_		
5060 W Colonial Dr Ste	113				
	Address		_		
Orlando, FL 32808					
	City, State and Zip Code	e			
E-mail address: (to	o be used for future annu	ual report notific	ation)		
For further information	concerning this matter.	please call:			
PEC Chambers	Ü	407 at (522 4-	480	
Name of Co	ontact Person		ode 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 Filir and Certified C			
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center			New F Division P. O. E	ING ADDRESS: illings Section on of Corporations dox 6327 assee, FL 32314	

Certificate of Conversion For "Other Business Entity" Into

Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:
Triangle Floor Covering LLC - L) Y DD (N) QD S S 8
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
(Enter state, or if a non-U.S. entity, the name of the country)
07/31/2014 on .
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 <u>attached Articles of Incorporation:</u>
T.F.C. Tile and Stone inc
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: [01/02/2019]
(I ne effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida
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.

Page 1 of 2

Signed thisday of	20 19
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman, Director, Offic Incorporator:	er, or, if Directors or Officers have not been selected, an
Printed Name: Jacob Title: Presider	11
Required Signature(s) on behalf of Other Business I	Entity: [See below for required signature(s).]
Signature:	
Printed Name:	Title: President
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 Signature of one General Partner.	Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I		Stone Inc		
The name of t	the corporation shall be: 1.7.6. The and	-		
ARTICLE I	I PRINCIPAL OFFICE			
	place of business/mailing address is:			
	Principal street address		Mailing address, if different is	:
1700 Little Sp	oring Hill Drive	_		
Ococe, F1, 34	761	<u> </u>		<u>.</u>
		<u> </u>		
	III PURPOSE			
The purpose	for which the corporation is organized	l is:		
Any and all la	awful business			
		-		
				<u> </u>
				ZIIIS IIAS
				芸一劳
	· 			<u> 영화</u>
			· · · · · · · · · · · · · · · · · · ·	60
				
				€20
		· · · · · · · · · · · · · · · · · · ·		
ARTICLE I	TV SHARES			
the number (of shares of stock is:			
VRTICLE	V INITIAL OFFICERS AND/O	R DIRECTORS		
lame and Ti	Jacob K Brown President	Name and Title	Magnus C Hedegaard COO	
ddress:	1700 Little Spring Hill Drive	Address:	201 Willpw Bend Drive	
	Ococe FL 34761		Clermont FL 34741	
me and Ti	itle:	Name and Title	e:	
dress:		Address:		
1 200				
ie and Ti	tle:	Name and Little	e:	
ress:		Address:	·····	
	 			

ARTICL The name	e and Florida street address (P.O. Box NC	acceptable) of the registered agent is:
Name:	Jacob K Brown President	•
Address:	1700 Little Spring Hill Drive	
7 ((())	Ocoec FL 34761	
ARTICL		
The <u>name</u>	and address of the Incorporator is:	
Name:	ATP Business Solutions Inc	
Address:	5060 W Colonial Dr Ste 113	
	Orlando FL 32808	
******* Having be	**************************************	**************************************
		intment as registered agent and agree to act in this capacity
	23	1/29/19
	Required Signature/Registered Agent	Date
		d herein are true. I am aware that any false information submitted in a degree felony as provided for in s.817.155, F.S.
,	///	1/29/19
,	Required Signature/Incorporato	Date

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