L09000052140

	(Req	juestor's Name))
	(Add	ress)	
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	(City	/State/Zip/Phor	ne #)
PICK-U	JP	☐ WAIT	MAIL
	(Bus	iness Entity Na	me)
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Certified Copies		Certificate	es of Status
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<u> </u>			
Special Instruction	is to F	iling Officer:	





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04/06/09--01016--015 **155.00

SECRETARY OF STATE



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Carpet Magic FL, LLC
(Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
Christopher TKac Email: (Contact Person) Carpet Magic FL, LLC CT71070 @ aol. com (Firm/Company)
Carpet Magic FL, LLC Ct 71070 @ aol. com
(Firm/Company)
4132 SW 7th Ave. (Address)
Cape Coral FL. 33914 (City, State and Zip Code)
(City, State and Zip Code)
For further information concerning this matter, please call:
Christopher TKuc at (239) 898-6366 (Name of Contact Person) (Area Code and Daytime Telephone Number)
(Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certified Copy \$180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
Clifton Building P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 7, 2009

CHRISTOPHER TKAC 4132 SW 7TH AVENUE CAPE CORAL, FL 33914

SUBJECT: CARPET MAGIC FL. LLC

Ref. Number: W09000016216

We have received your document for CARPET MAGIC FL, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please note #5 on Certificate of Conversion you put a date of 4/1/09 that date cannot be prior to the date the document was received in our office. The document was received in our office on 4/6/09.

Please return 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) 245-6067.

Neysa Culligan

Regulatory Specialist II

Letter Number: 609A00011667

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Carpet Magic of SWFL LLC
(Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
Christopher TKac (Contact Person)
(Contact Person)
Carpet Magic (Firm/Company) C+71070 @ Aol. Com
4132 SW 7th Ave. C+71070 @ Aol. Com
(Address)
Cape Coral, FL. 33914
(City, State and Zip Code)
For further information concerning this matter, please call:
Christopher Tkac at (239) 898-6366
(Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$150.00 Filing Fees \$180.00 Filing Fees \$185.00 Fi
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section Division of Corporations Division of Corporations
Clifton Building P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301



Certificate of Conversion For "Other Business Entity"

Into

Florida Limited Liability Company

This Certificate 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.608.439, Florida Statutes.

1. The name of the "Other Business En	tity" immediately	prior to the filing of this
Certificate of Conversion is: Carpet	Magic	G08270900221
	of Other Busines	
2. The "Other Business Entity" is a (Enter entity type. Example: corpo general partnership, co	ration, limited pa	artnership, sole proprietorship,
first organized, formed or incorporated (Enter state, or if a non-	under the laws of U.S. entity, the n	Florida ame of the country)
on Sept. 26,2008 (Enter date "Other Business Entity		ized, formed or incorporated)
3. If the jurisdiction of the "Other Busin under the laws of which it is now organ	-	
4. The name of the Florida Limited Lia Articles of Organization:	bility Company a	s set forth in the attached
Carpet Mo	igic of SW	FLILLC .
(Enter Name of Flor		
5. If not effective on the date of filing, (The effective date: 1) cannot be prio document is filed by the Florida Depa effective date listed in the attached Allisted therein.)	or to nor more the artment of State;	an 90 days after the date this <u>AND</u> 2) must be the same as the

Signed this 20th day of May	_20 <u>09</u>
Signature of Member or Authorized Representa	
Signature of Member or Authorized Representative Printed Name: Chris Tkac	e: Chille: MGR
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature: Chi H	
Printed Name: Chris Tkac	Title: OWNER/MGR
Signature:	
Printed Name:	Title:
Signature	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Timod Nume.	Title.
Signature:	70'41
Printed Name:	Intle:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
Signature of the General Latiner.	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of the principal office of the Limited

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's

Mailing Address:

ARTICLE I - Name:

ARTICLE II - Address:

Principal Office Address:

4132 SW 7th Ave

Cape Coral, FL. 33914

Liability Company is:

"LLC.")

The name of the Limited Liability Company is:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
VINCENT RECCA
VINCENT RECCA Name S310 S.W. 11 = COURT
Florida street address (P.O. Box NOT acceptable)
CAPE CORAL, FL 33914 City, State, and 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, 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 608, F.S Registered Agent's Signature (REQUIRED)
(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>'itle:</u> MGR" = Manager MGRM" = Managing Member	Name and Address:
MGR	Christopher TKac 4132 Sw 7th Ave. Cape Cural, FL 33914
 	
E V: Effective date, if other than the ctive date: 1) cannot be prior to m	(Use attachment if necessary) date of filing: (OPTIONAL) nor more than 90 days after the date this
ctive date: 1) cannot be prior to n t is filed by the Florida Departme	date of filing: (OPTIONAL)
ctive date: 1) cannot be prior to not is filed by the Florida Departmentive date listed in the attached Costed therein.)	date of filing: (OPTIONAL) nor more than 90 days after the date this nt of State; AND 2) must be the same as
ctive date: 1) cannot be prior to not is filed by the Florida Departmentive date listed in the attached Costed therein.) EQUIRED SIGNATURE: Signature of a member or an autofilia document constitutes an affiliation.	(OPTIONAL) nor more than 90 days after the date this nt of State; AND 2) must be the same as ertificate of Conversion, if an effective thorized representative of a member. 408(3), Florida Statutes, the execution firmation under the penalties of period;
ctive date: 1) cannot be prior to not is filed by the Florida Departmentive date listed in the attached Costed therein.) EQUIRED SIGNATURE Signature of a member or an automatic department of this document constitutes an after that the facts state the facts state the facts state that the facts state that the facts state the facts	coptional) (OPTIONAL) for more than 90 days after the date this int of State; AND 2) must be the same as dertificate of Conversion, if an effective of thorized representative of a member. (408(3), Florida Statutes, the execution firmation under the penalties of periods, ated herein are true.)
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Page 2 of 2