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(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	 -
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	· · · · · · · · · · · · · · · · · · ·

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Imperial Flooring Group Inc. (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Imperial Flooring Group Inc (Firm/Company)
3640 Summerlin Ln (Address)
Jax, FL 32224 (City. State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Name of Contact Person) at (904) 401 - 7961 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$\sum_{\text{S150.00 Filing Fees}} \ \text{Certified Copy} \ \text{S185.00 Filing Fees} \ \text{and Certified Copy} \ \text{S125 for Articles} \ \text{of Organization} \ \text{Status} \ \text{Organization} \ \text{S155.00 Filing Fees} \ \text{and Certified Copy} \ \text{and Certified Copy} \ \text{Certificate of Status} \ \text{Certificate of Status} \ \text{Organization}
STREET ADDRESS: New Filing Section MAILING ADDRESS: New Filing Section
Division of Corporations Clifton Building P. O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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 of C Imperial Flooring Group Inc 914-90220. (Enter Name of Other Business Entity)	Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a <u>corporation</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law o	r 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	of the country)
on	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of	f Organization:
Imperial Flooring Group LLC (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 cales the date this document is filed by the Florida Department of State.) Note: It the date inserted in this block does not meet the applicable statutory filing requirements, this date will not 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 right which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S.	j= j 18 0€C −3

Signature	of Authorized Representative of Limi	ted Liability Company:	
Printed Nar	of Authorized Representative: <u>Sautana</u> ne: <u>Joao W. Sautana</u>	_ Title: Nanager	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s	s)
	NEDO PO		
Printed Nar	ne: Naile Maturell	Title: President	
Signature:			
Printed Nar	ne:	Title:	
Cianatura:			
Printed Nar	ne:	Title:	
Signature:			
Printed Nar	ne:	Title:	
Signature:			
Printed Nar	ne:	Title:	
Signature: Printed Nar	ne:	Title:	
Signature: Printed Nar If Florida (Signature o If Directors If Florida (Signature o	ne:	Title: Officer. corporator must sign. ty Partnership:	
Signature: Printed Nar If Florida (Signature o If Directors If Florida (Signature o If Florida (Signature o All others:	ne:	Title: Officer. corporator must sign. ty Partnership:	
Signature: Printed Nar If Florida (Signature o If Directors If Florida (Signature o If Florida (Signature o All others:	ne: Corporation: f Chairman, Vice Chairman, Director, or or Officers have not been selected, an In General Partnership or Limited Liabili f one General Partner. Limited Partnership or Limited Liabili of ALL General Partners.	Title: Officer. corporator must sign. ty Partnership:	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

, , ,	
Imperial Flooring (Must contain the words "Limited Liability	Group LLC Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12025 Beach Blvd Jacksonville, FL 32246 ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered)	
business entity with an active Florida registration.)	
The name and the Florida street address of the results of the resu	
	CD temps
3640 Summerlin A Florida street address (P.O.	Box NOT acceptable)
City	<u>le fl 3222Ψ</u> Sip

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..

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's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager MGR MGR MGR MGR MGR MGR MGR MG
(Use attachment if necessary)
TCLE V: Other provisions, if any.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)