

Q10000067348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

L08-41633

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT⁸¹³⁸⁴

AUG 17 2010

EXAMINER

Office Use Only



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08/02/10--01045--029 **122.50

2010 AUG 13 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2010

SAMUEL MORABITO
P.O. BOX 100526
FORT LAUDERDALE, FL 33310

SUBJECT: ACTION LINEN SERVICES, LLC
Ref. Number: W10000036384

We have received your document for ACTION LINEN SERVICES, LLC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 110A00018696

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Action Linen Services, LLC

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Samuel Morabito

Contact Person

Action Linen Services, LLC

Firm/Company

P.O. Box 100526

Address

Fort Lauderdale, Florida 33310

City, State and Zip Code

actionlinen@actionlinen.com

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

For further information concerning this matter, please call:

Samuel Morabito

Name of Contact Person

at (954)

302-3252

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

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

FILED
2010 AUG 13 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Certificate of Conversion **and attached Articles of Incorporation** 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:

Action Linen Services LLC

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 Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on 04/22/2008
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:

Florida

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

Action Linen Services, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 07/28/2010
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 28 day of July, 20 10.

Required Signature for Florida Profit Corporation:

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

Printed Name: Samuel Morabito Title: Director

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Samuel Morabito
Printed Name: Samuel Morabito Title: Managing 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:

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

Action Linen Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2730 NW 29 terrace
Fort Lauderdale, Florida 33311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Frances Morabito
President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Samuel Morabito
701 NW 19 street
#508
Fort Lauderdale, Florida 33311

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Samuel Morabito
701 NW 19 street
#508
Fort Lauderdale, Florida 33311

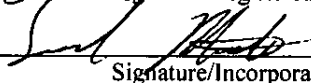
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

07/28/2010

Date



Signature/Incorporator

07/28/2010

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 AUG 13 PM 3:00

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