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(Requestor's Name)
(Address)
(Address)
(Ch. (Ch.) - 17 in (Dh.) - 10
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
:

Office Use Only



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J. SAULSBERRY EXAMINER MAY 4 2011

COVER LETTER

TO: Registration Section

Division of C	Corporations					
SUBJECT:		E ENTERPRISES (
	Name of R	esulting Florida Profit Cor	poration			
	· · · · · · · · · · · · · · · · · · ·	-	, and fees are submitte cordance with s. 607.1		ert an	
Please return all corr	espondence concerning	g this matter to:				
DW	AYNE PARRISH					
	Contact Person					
ELEGANTE	ENTERPRISES	67, INC				
	Firm/Company					
493	1 SW 19TH STREET	-				
	Address					
\A/E	OT DADIZ EL 2202	12			~	
	ST PARK, FL 3302 City, State and Zip Code	23		TESSES.	9	
	rty, State and Zip Code			₽Ř	MA	1
Parrisho	dwayne36@yahoo	com		ASA IVI	011 MAY -3	****
E-mail address: (to	dwayne36@yahoo. be used for future annual r	eport notification)		SEE.		<u></u>
For further informati	on concerning this mat	tter, please call:		FSI	PH 1:45	
DWAYNE PARRISH	4	at (954) 894	-2044	Ä	-	-
Name of Con		_ut (ime Telephone Number	—) - "	CI	
Enclosed is a check t	for the following amou	nt•	,			
Efficiosed is a cheek i	or the following afflou	IIL.	, ,			
□ \$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	<u>S:</u>	MAILING A	ADDRESS:			
Registration Section		Registration	Section			
Division of Corporat	ions	Division of C	•			
Clifton Building	O' 1	P. O. Box 63				
2661 Executive Cent Tallahassee, FL 323		Tallahassee,	FL 32314			
Tallaliassee, FL 323	01	· · ·				

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: ELEGANTE ENTERPRISES 67, LLC Enter Name of Other Business Entity
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 JUNE 22, 2009 Enter date "Other Business Entity" was first organized, formed or incorporated Total Control or
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 lawsof which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
ELEGANTE ENTERPRISES 67, INC
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (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.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

Page 1 of 2

Signed this 27TH day of APRIL	. 20_11			
Required Signature for Florida Profit Corporat Individual signing affirms that the facts stated in the a third degree felony as provided for in s.817.155,	is document are true. Any false inform	nation co	onstitu	tes
Signature of Chairman, Vice Chairman, Director, C selected, an Incorporator:	Officer, or if Directors or Officers have	e not be	en	
Printed Name: Dwayne Parrish Pitle:	President	-		
Required Signature(s) on behalf of Other Business stated in this document are true. Any false informations. 817.155, F.S. [See below for required signature(s).	tion constitutes a third degree felony a			
Signature:		-		
Printed Name: DWAYNE PARRISH	Title: PRESIDENT	-		
Signature:		_		
Printed Name:	Title:	-		
S'				
Signature:Printed Name:	Title:	-		
		•		
Signature:				
Printed Name:	Title:	- ≱င္	201	
Signature:		₽S	2011 MAY -3	18
Printed Name:	Title:	- XE	~	*****
2.		SE	င်္မ	
Signature:	Title:	- 목숙	PH	117
Timed Name.		- 10 21.		-
Signature: Printed Name: Signature: Printed Name: If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	AIDA	: 45	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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:	\$35.00			
Fees for Florida Articles of Incorporation:	\$70.00			
Certified Copy:	\$8.75 (Optional)			
Certificate of Status:	\$8.75 (Optional)			

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

	PRINCIPAL OFFICE	h dailine addasas	N 4-11: d dunca 16 d100 1	
4004 014	Principal street address	_	Mailing address, if different is:	
	19TH STREET	4931 SW 19TH STREET WEST PARK, FL 33023		
WEST PAR	RK, FL 33023	WEST PARK, PL 33023		
ARTICLE III	PURPOSE			
	nich the corporation is organized is:			
HOME REMODALI	NG AND ALL OTHER LAWFUL BUSINESS			
<i></i>				
ARTICLE IV				
The number of share	es of stock is: 1			
	INITIAL OFFICERS AND/OR DIR			
	e: DWAYNE PARRISH CEO			
Address:	4931 SW 19TH STREET	Address:		
	WEST PARK, FL 33023			
Name and Tit	مان	Name and Title:		
Address:			2	
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Name and Tit		Name and Title:	S. ₹	
Address:		Address:	ာ္က≃ု ယ	
				
			TATE ORID	
	REGISTERED AGENT		£ 5	
	rida street address (P.O. Box NOT accep	otable) of the registered agent is:	≥ Ω	
Name:	DWAYNE PARRISH			
Address:	4931 SW 19TH STREET			
	WEST PARK, FL 33023			
: .	INCORDOD ATOR			
•	INCORFORATOR			
RTICLE VII				
ARTICLE VII.	ress of the Incorporator is:			
ARTICLE VII The name and add Name:	ress of the Incorporator is:			
	PESS OF the Incorporator is: DWAYNE PARRISH 4931 SW 19TH STREET			
he name and add Name: Address:	ress of the Incorporator is: DWAYNE PARRISH 4931 SW 19TH STREET WEST PARK, FL 33023			
he name and add Name: Address:	ress of the Incorporator is: DWAYNE PARRISH 4931 SW 19TH STREET WEST PARK, FL 33023 d as registered agent to accept service of	f process for the above stated corporation	at the place designated	
he name and add Name: Address:	ress of the Incorporator is: DWAYNE PARRISH 4931 SW 19TH STREET WEST PARK, FL 33023 d as registered agent to accept service of	f process for the above stated corporation nt as registered agent and agree to act in t	at the place designated this capacity	
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