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(Ad	dress)		
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PICK-UP	☐ WAIT	MAIL	
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Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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SECRETARY OF STATE
SECRETARY OF STATE

T. CLINE
MAY 1 7 2011
EXAMINER

COVER LETTER

• TO: Registration Section Division of Corporations

SUBJECT: Design			ples, Inc.	_		
	Name of R	esulting Florida Profit Corp	poration			
The enclosed Certific "Other Business Enti	cate of Conversion, Ar ity" into a "Florida Pro	ticles of Incorporation of the Corporation" in acc	, and fees are submitte cordance with s. 607.1	d to cor 115, F.S	ivert ai	1
Please return all corr	espondence concernin	g this matter to:				
Maria or Schiller						
-	Contact Person		•			
Design Naples,	Inc.				١	•
	Firm/Company					
390B 17th Street						
390B Trut Sueet	Address					
Naples Florida 34	120 City, State and Zip Code					
· ·	try, State and Zip Code					
info@designnapl	es.com be used for future annual r	eport notification)				
·	on concerning this ma					
	_	·				
			-9142 ime Telephone Number	- <u>₹</u>	201	
Name of Cor	nact Person	Area Code and Dayti	ane releptione Number	CRET		mining o
Enclosed is a check	for the following amou	ınt:		ETAR	2011 MAY 16	Marie and
□ \$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	RY OF STA	6	
STREET ADDRESS:		MAILING A	ADDRESS:	9E	20	
Registration Section	ction Registration Section					
Division of Corporat	sion of Corporations Division of Corporation					
		P. O. Box 63				
2661 Executive Cent		Tallahassee,	FL 32314			
Tallahassee, 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:
Design Naples LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a LLC (Enter entity type. Example: limited liability company, limited partnership of 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 4/10/10
Enter date "Other Business Entity" was first organized, formed or incorporated 2
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>
Design Naples, 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.

Page 1 of 2

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed	d this <u>11</u>	day of May		, 2011	
Dagui	and Clamato	un fan Flanida Duafit	Composions		
		re for Florida Profit		nt are true. Any folso i	information constitutes
		ny as provided for in s.		it are true. Any taise i	mornation constitutes
		man, Vice Charlman, I			rs have not been
selecte	ed, an Incorp	porator: Les C.S	lu		
Printe	d Name: <u>Set</u>	h Schiller	Title: President		
Dogni	rad Signatus	re(s) on behalf of Othe	v Rusinoss Entity: In	dividual(s) signing af	firm(s) that the facts
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		ee below for required sign		dies a tima degree for	ony as provided for in
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		4. Shu			
		Schiller		sident	
Signati	$_{ m ure:}$ $\mathcal{M}_{oldsymbol{lpha}}$	sie f			
Printed	l Name: Mari	ia Schiller	Title: CE	0	
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Printec	i Name:		I itle:		
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If Flor	rida General	l Partnership or Limit	ed Liability Partners	ship:	
Signat	ure of one G	eneral Partner.			
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If Flor	rida Limited	Liability Company:			20 7A!
		ber or Authorized Repr	esentative.		
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All oth					2011 MAY 16 SECRETARY ALL AHASSE
Signati	ure of an aut	horized person.			<u> </u>
Focas					
Fees:	Cartificata	of Conversion:	\$35.00		STA STA
		orida Articles of Incorp			: 20 VTE RIDA
	Certified C		\$8.75 (O	ntional)	A 0
r	Certificate	• •	\$8.75 (O ₁	•	
	Solutionic	o. Juno,	40.75 (0)		

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

	NAME		
The name of the co	prporation shall be: Design N	laples, Inc.	
	PRINCIPAL OFFICE	•	•
	Principal street address	Mailing add	ress, if different is:
390B 17t			
Naples Flo	rida 34120	· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·		
ARTICLE III	PURPOSE		
	hich the corporation is organized is:		
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			11161119
ARTICLE IV	<u>SHARES</u>	•	•
The number of shar	res of stock is: 100		
ADDICE II		namona	
	INITIAL OFFICERS AND/OR DIRI		
Address:	390B 17th Street Naples Florida 34120	Name and Title: Address:	
Address.	Saud Triti Siteat Napies Fluida 54 (20	Address.	
		Name and Title:	
Address:	390B 17th Street Naples Florida 34120	Address:	
			<u> </u>
Name and Ti	tle:	Name and Title:	
Address:		Address:	
•			
		Seth Schiller	- F/0 65
ARTICLE VI	REGISTERED AGENT		SECRET
	rida street address (P.O. Box NOT accep	table) of the registered agent is:	
Name:	Seth Schiller	<u>-</u>	A manual
Address:	390B 17th Street NW Naples Florida 34120		SS To
ARTICIE VII	INCORPORATOR		
	Iress of the Incorporator is:		- ES 👟 🖳
Name:	Seth Schiller		유 <u>주</u> 2
Address:	390B 17th Street NW Naples Florida 34120		₩ O
		·····	
Having been name	ad an manistaned assaul to assaul namina ut		tion at the place designated in
	ed as registered agent to accept service of m familiar with and accept the appointme		
ims cerujicaie, i ui		" as registered agent and agree to act	in this cupacity
1	[[. B][[]]	E/4/2 24	
Pagui	ired Signature/Registered Agent	5/11/2011 Date	-
Requi	ned Signature/Registered Agent	Date	
I submit this docu	ment and affirm that the facts stated her	ein are true. I am aware that any fai	lse information submitted in a
	epariment of State constitutes a third degr		
1	V / Onn	/ /	•
	u (5/1/1/1	5/1/2011_	_
Requir	ed Signature/Incorporator	' Date	