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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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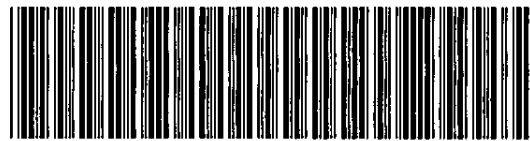
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 JUN 14 AM 11:33

JUN 15 2012

T. HAMPTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ELITE NAILS & SPA CORPORATION

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:

CUONG HO

Contact Person

ELITE NAILS & SPA

Firm/Company

817 N. NOB HILL RD

Address

PLANTATION, FL 33324

City, State and Zip Code

LAMCPA@YAHOO.COM

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

For further information concerning this matter, please call:

LAM NGUYEN, CPA

Name of Contact Person

at ( 954 ) 753-3316

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**

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:

ELITE NAILS & SPA, 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 2/25/2010  
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:

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

ELITE NAILS & SPA CORPORATION

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.

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Signed this 4<sup>TH</sup> day of JUNE, 20 12.

**Required Signature for Florida Profit Corporation:**

Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: *Lam Nguyen*

Printed Name: LAM NGUYEN Title: INCORPORATOR

**Required Signature(s) on behalf of Other Business Entity:** Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]

Signature: *Cuong Ho*  
Printed Name: CUONG HO 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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**ARTICLES OF INCORPORATION**  
**OF**  
**ELITE NAILS & SPA CORPORATION**

**ARTICLE I      NAME**

The name of the corporation shall be ELITE NAILS & SPA CORPORATION.

**ARTICLE II     PRINCIPAL OFFICE**

The principal office of the corporation is:

817 N. NOB HILL RD  
PLANTATION, FL 33324

The Board of Directors may, from time to time, move the principal office to any other address in the State of Florida, and establish branch offices in any places within the state of Florida, as the said corporation may desire.

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is to engage in the transaction of any and all business activities permitted under the laws of Florida and the United States of America.

**ARTICLE IV    SHARES**

The number of shares the corporation is authorized to issue is 100 shares with a par of \$1.00 each.

**ARTICLE V     INITIAL BOARD OF DIRECTORS**

The names, titles and address of the initial Directors/Officers are as follows

CUONG HO, President, Secretary      2935 SW 161st Avenue, Miramar, FL 33027

The number of Directors may be increased from time to time by the laws adopted by the shareholders, but shall never be less than one (1).

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**ARTICLE VI INDEMNIFICATION**

This corporation shall indemnify any officer, director, employee, or agent and former officer, director, employee, or agent, to the full extent permitted by law.

**ARTICLE VII DURATION**

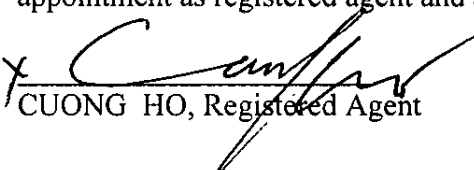
This corporation's duration shall be perpetual.

**ARTICLE VIII REGISTERED AGENT**

The Florida street address of the corporation's the initial registered office and the name of its initial registered agent at that office is as follows:

CUONG HO  
2935 SW 161st Avenue  
MIRAMAR, FL 330270-5235

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

  
CUONG HO, Registered Agent

June 4, 2012  
Date

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**ARTICLE IX INCORPORATOR**

The name and address of the Incorporator is:

LAM NGUYEN  
4925 NW 106 Avenue  
CORAL SPRINGS< FL 33076

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in S.817.155, F.S.

  
LAM NGUYEN Incorporator

6/4/2012  
Date