P13000009646

(Requestor's Name)
(Address)
(Address)
(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



900242534129

01/04/13--01015--017 **11.25

12/17/12--01026--015 **43.75

01/30/13--01003--003 **58.75

SECRETARY OF STATE DIVISION OF CORPORATIONS 2013 JAN 29 PM 4: 11

C. LEWIS

JAN 3 2013

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 7, 2013

TERRI SILAR / PROFILE MODELING 3314 HENDERSON BLVD SUITE 104 TAMPA, FL 33609

SUBJECT: PROFILE MODELING LLC

Ref. Number: L12000151138

We have received your document for PROFILE MODELING LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can't change an llc to a corp by filing articles of correction. You would have to file a conversion in order to change it to a corporation.

If you have any further questions concerning your document, please call (850) 245-6051.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 712A00029939

COVER LETTER

TO: Charter Section

Division of Corporations	
SUBJECT. Profile Model	100
SUBJECT: Profile Modeli Name of Resultin	g Forida Profit Corporation
	ticles of Incorporation, and fees are submitted to
	Florida Profit Corporation" in accordance with s.
Please return all correspondence concerning	g this matter to:
Terri Silar Contact Person	
Profile Modeling	
3314 Henderson Branders	lvd. 5te. 104
TAMPA, Florida 3 City, State and Zip Code	3409
terrisilar @ yahoo. C E-mail address: (to be used for future annual re	eport notification)
For further information concerning this mat	tter, please call:
Terri Silar Name of Contact Person	at (210) 259-7899 Area Code and Daytime Telephone Number
Enclosed is a check for the following amou	
•	\$113.75 Filing Fees \$122.50 Filing Fees,
and Certificate of Status	and Certified Copy Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Charter Section Division of Corporations	Charter Section Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

Certificate of Conversion

For

"Other Business Entity" Into

Florida Profit Corporation

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2013 JAN 29 PM 4: 11

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.

of Conversion is:
Profile Modeling LLC L12000151138
Enter Name of Other Business Entity
2. The "Other Business Entity" is a LLC (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 December 3 2012 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 <u>attached Articles of Incorporation:</u> Profile Modeling 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.)

Signed this 23 day of January	, 20 <u>/3</u>	
Required Signature for Florida Profit Corporati	ion:	
Signature of Chairman, Vice Chairman, Director, Cobeen selected, an Incorporator: Printed Name: 18 r. Title:	Offiger, or, if Directors or Officers have OWNER Presiden	e not Z
Required Signature(s) on behalf of Other Business signature(s).]		
Signature: Silar Silar	Title: OWNEr / Presiden	<u> </u>
Signature: Printed Name:	Title:	-
		_
Signature: Printed Name:	_Title:	-
Signature:Printed Name:	Title:	<u>.</u> -
Signature: Printed Name:	Title:	<i>-</i> -
Signature:Printed Name:	_ Title:	<u>-</u>
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	v Partnershin:	SECR DIVISION
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	CRETARY OF SION OF CORE
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		F STATE OR STORES
All others: Signature of an authorized person.		·
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) 2013 JAN 29 ARTICLE I The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: Blud. Ste 104 ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: placement of men, women and children ARTICLE IV SHARES The number of shares of stock is: President Name and Title: Ste. 104 Henderson Blud Address: Florida 33609 Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address: REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Terri Silar Address: 3314 Henderson Blvd. Ste. 10-Tampa, Plorida 33609

ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS		
Cil			
Name: <u>lerri Oilar</u> Address: <u>3314 Henderson</u> Blvd. Ste. 104 TAMPA, Plorida 33609			
- Jampa, Florida 33609			
**********************	*****		
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 () () () () () () () () () (1/23/13		
Required Signature/Registered Agent	Date		
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 Pepartment of State constitutes a third degree felony as provided for in s.817.155, F.S.			
Peri Dilan	1/23/13		
Required Signature/Incorporator	/ Date/		