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(Red	juestor's Name)	
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Special Instructions to F	filing Officer:	

Office Use Only



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#### **COVER LETTER**

TO: Charter Section

**Division of Corporations** 

### SURJECT: RMC Hospitality 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:

□\$113.75 Filing Fees

and Certificate of

Status

Disease Cidede		
Ricardo Cidade		
Contact Person		
RMC Hospitality Services I	LC	
Firm/Company	· · · · · · · · · · · · · · · · · · ·	<del></del>
55 SE 2nd Ave, 1st Floor		
Address		_
Delray Beach, FL 33444		
City, State and Zip Code		
ays@rmchospitality.com /	•	
E-mail address: (to be used for future annual rep	ort notification	
For further information concerning this matte	r, please call	:
Ricardo Cidade	<sub>at (</sub> 954	<sub>)</sub> 871-9916
Name of Contact Person	Area Code	and Daytime Telephone Numb
Enclosed is a check for the following amount	:	

#### **STREET ADDRESS:**

■ \$105.00 Filing Fees

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

#### **MAILING ADDRESS:**

**\$122.50** Filing Fees,

Certified Copy, and Certificate of Status

□\$113.75 Filing Fees

and Certified Copy

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

### KECEIVED

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 26, 2013

RICARDO CIDADE 55 SE 2ND AVE 1ST FLOOR DELRAY BEACH, FL 33444

SUBJECT: RMC HOSPITALITY SERVICES LLC

Ref. Number: W13000042049

We have received your document for RMC HOSPITALITY 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.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of 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) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 113A00018152

# 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: RMC Hospitality Services LLC 43-61414 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\_04/26/2013 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: RMC Hospitality Services 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

Page 1 of 2

document is filed by the Florida Department of State; <u>AND</u> 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 22 day of July	20_13
Required Signature for Florida Profit Corporat	ion:
Signature of Chairman, Vice Chairman, Director, Cobeen selected, an Incorporator:  Printed Name: Ricardo Cidado  Title:	Officer, or, if Directors or Officers have no
Printed Name: Ricardo Cidady   Intle:	Senior Partner
Required Signature(s) on behalf of Other Business signature(s).]  Signature:	Entity: [See below for required
Printed Name Ricardo Cidade	Title: Senior Partner
Signature:Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
Signature: Printed Name:	Title
Frinted Name.	
Signature:Printed Name:	Title
rimed Name.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership;
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: Fees for Florida Articles of Incorporation: Certified Copy:	\$35.00 \$70.00 \$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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

The name o	f the corporation shall be: RMC Hospita		
ARTICLE			
i ne princip	al place of business/mailing address is:		
	Principal street address		Mailing address, if different is:
55 SE	2nd Ave, 1st Floor		· · · · · · · · · · · · · · · · · · ·
Delray	Beach, FL 33444		
ARTICLE			
	e for which the corporation is organized is:		
Repairs	, Maintenance and Renovation of	physical pla	ants of the Hospitality Industry
ARTICLE The number	r of shares of stock is:	PECTORS	
	Title: Ricardo Cidade - CFO	Name and Tit	<sub>le:</sub> Michael Cannizzaro - CO
Address:	350 N. Federal Highway # 1214	Address:	153 Walnut creek Ln
	Boynton Beach, FL 33435		Dallas, GA 30157
Name and	Title:	Name and Tit	le:
Address:		Address:	
Name and	Title:	Name and Tit	le:
Address:		Address:	
<b>ARTICLE</b> The <u>name a</u>	VI REGISTERED AGENT and Florida street address (P.O. Box NOT acce	ptable) of the reg	ristered agent is:
Name:	Ricardo Cidade		
Address:	350 N. Federal Highway # 1214		
	Boynton Beach - FL 33435		

ame:	and address of the Incorporator is: Ricardo Cidade	<b></b>
ddress:	350 N. Federal Highway # 1214	
	Boynton Beach-FL 33435	
*****	***************************************	******
	**************************************	
ignated		
ignated		intment as registered agent and agree to act in this
ignated pacity	Required Signature/Registered Agent his document and affirm that the facts stated herein a	intment as registered agent and agree to act in this  O7/22/2013  Date  The true. I am aware that any false information
ignated acity	in this certificate I am familiar with and accept the appointment of the Required Signature Registered Agent	intment as registered agent and agree to act in this  O7/22/2013  Date  re true. I am aware that any false information
ignated pacity	Required Signature/Registered Agent his document and affirm that the facts stated herein a	intment as registered agent and agree to act in this  O7/22/2013  Date  The true. I am aware that any false information