

MD 2/17

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: PROFILE SOLUTIONS, INC.

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:

ANDREW SIEGERMAN

Contact Person

SIEGERMAN & COMPANY

Firm/Company

1440 CORAL RIDGE DRIVE # 117

Address

CORAL SPRINGS, FLORIDA 33071

City, State and Zip Code

ANDY@SIEGERMAN.COM

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

For further information concerning this matter, please call:

ANDREW SIEGERMAN at (**954**) **796-4050**

Name of Contact Person

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:

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

MAILING ADDRESS:

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

MAIL TO



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 3, 2014

ANDREW SIEGERMAN
SIEGERMAN & COMPANY
1140 CORAL RIDGE DRIVE #117
CORAL SPRINGS, FL 33071

SUBJECT: PROFILE SOLUTIONS, INC.
Ref. Number: W14000006976

We have received your document for PROFILE SOLUTIONS, INC. and your check(s) totaling \$105.00. 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.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 614A00002379

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

FILED
14 FEB 14 PM 4:25
DEPT. OF STATE
ALBANY, FLORIDA

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:

PROFILE SOLUTIONS, 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 **JANUARY 13, 2014**

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:

N/A

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

PROFILE SOLUTIONS, 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 22ND day of JANUARY, 2014.

Required Signature for Florida Profit Corporation:

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

Printed Name: DORE S PERLER Title: DIRECTOR

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

X Signature: _____
Printed Name: DORE S PERLER Title: MGRM

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)

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

ARTICLE I NAME PROFILE SOLUTIONS, INC
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailling address is:

Principal street address

Mailing address, if different is: _____

9400 SW 49TH PLACE
COOPER CITY, FL 33328

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES 10,000 SHARES AUTHORIZED
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DORE S PERLER, DIR
Address: 9400 SW 49TH PLACE
COOPER CITY, FL 33328

Name and Title: _____
Address: _____

Name and Title: RONALD B ROY, DIR
Address: 5088 NW 105TH DR
CORAL SPRINGS, FL 33076

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: DORE S PERLER
Address: 9400 SW 49TH PLACE
COOPER CITY, FL 33328

FILED
CLERK OF DISTRICT COURT
FLORIDA
14 FEB 14 PM 4:25
1160

14 FEB 14 PM 4:25
RECEIVED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DORE S PERLER
Address: 9400 SW 49TH PLACE
COOPER CITY, FL 33328

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

X



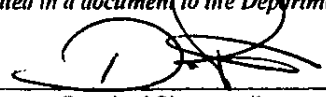
Required Signature/Registered Agent

1/22/14

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 Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

X



Required Signature/Incorporator

1/22/14

Date