P15000075881

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u></u>
(Cit	y/State/Zip/Phon	- (1)
(Cr	yrotaterzipiPnon	∪ #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
·	·	
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special instructions to	Filing Officer:	
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9/17

COVER LETTER

Division of Cor	porations				
SURTECT: PREMIER	QUALITY GRANITE IN	C.			
beside i	Name of	Resulting Flori	da Profit (Corporation	
	e of Conversion, Articles Profit Corporation" in ac			es are submitted to convert an "Othe 5, F.S.	r Business
Please return all corresp	ondence concerning this	matter to:			
RUBEN D. TORO	,				
	Contact Person				
RUBEN TORO P.A.					
	Firm/Company				
79001 KINGSPOINTE P	KWY STE. 31				
	Address				
ORLANDO FL 32819					
	City, State and Zip Code				
rubencpa@bellsouth.net					
E-mail address: (t	o be used for future annu	ial report notifi	ication)		
For further information	concerning this matter,	please call:			
Ruben D. Toro		_at (370-6	445	
Name of Co	ontact Person	Area	Code and	l Daytime Telephone Number	
Enclosed is a check for	the following amount:				
	□\$113.75 Filing Fees and Certificate of Status			☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center			New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314	

Tallahassee, FL 32301

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	follov	vin gʻʻʻO	ther
Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statut	es.	8	
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Cor	iveŕsioi	70	
PREMIER QUALITY GRANITE LLC	-1		
Enter Name of Other Business Entity	.1		•
2. The Work of Business Forting LIMITED LIABILITY COMPANY		မှ သ	
2. The "Other Business Entity" is a (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)	el ele	0	
first organized, formed or incorporated under the laws of			
(Enter state, or if a non-U.S. entity, the name of the country)			
10/17/2014 on			
Enter date "Other Business Entity" was first organized, formed or incorporated	d		
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the law organized, formed or incorporated:	s of wh	ich it is	now
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporatio</u> PREMIER QUALITY GRANITE INC.	<u>n:</u>		
Enter Name of Florida Profit Corporation			
Effer Name of Florida From Corporation			
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) connect be prior to your more than 90 days after the date this document.			
Department of State; <u>AND</u> 2) must be the same as the effective date listed in the attached Artie if an effective date is listed therein.)	cles of	Incorpo	oration,
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the	is date	will not	. be

Signed	this 31 AUGUST	, 20		
	ed Signature for Florida Profit Corporation			
Signati Incorpo	ure of Chairman, Vice Chairman, Director, Offi orator:	cer, or, if Directors or Officers have not been	n selected.	ań ⁿ
	red Signature(s) on behalf of Other Business		a.]	င္ပာ
	are:			FH 3:
Printed	Name dairo A. Narvaez	Title: Authorized Member (AMBR)		30
	ıre:			
	Name:			
Signati	ıre:			
Printed	Name:	Title:		
Signati	ure:		-	
Printed	Name:	Title:	-	
Signati	ıre:		-	
Printed	Name:	Title:	-	
Signati	ure:		-	
Printed	l Name:	Title:	-	
	rida General Partnership or Limited Liabilit ure of one General Partner.	y Partnership:		
	<u>ida Limited Partnership or Limited Liabilit</u> ures of <u>ALL</u> General Partners.	y Limited Partnership:		
	rida Limited Liability Company: ure of a Member or Authorized Representative.			
All oth Signate	ners: ure 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)

ARTICLE I NAME The name of the corporation shall be: PREMIER QUALIT	TY GRANITE INC.
	۳ پين
THE PRINCIPAL OFFICE The principal place of business/mailing address is:	
	•
Principal street address HILL EVANGELINE AVE.	Mailing address, if different is:
ORLANDO FL 32809	;; -
	<u> </u>
ARTICLE III PURPOSE The purpose for which the corporation is organized is: THE PURPOSE FOR WHICH THIS CORPORATION IS O	ORGANIZED IS TO PROVIDE FLOORING AND COUNTE
NSTALLATION SERVICES AND RELATED ACCESOI	RIES
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR D	
ARTICLE V INITIAL OFFICERS AND/OR D	DIRECTORS
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: JAIRO A. NARVAEZ, DPTS	DIRECTORS
Name and Title: JAIRO A. NARVAEZ, DPTS LILL EVANGELINE AVE.	DIRECTORS
Name and Title: JAIRO A. NARVAEZ, DPTS LITTLE VANGELINE AVE.	DIRECTORS Name and Title:
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: JAIRO A. NARVAEZ, DPTS 1111 EVANGELINE AVE. ORLANDO FL 32809	DIRECTORS Name and Title: Address:
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: Address: ORLANDO FL 32809	DIRECTORS Name and Title: Address:
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: JAIRO A. NARVAEZ, DPTS HITT EVANGELINE AVE. ORLANDO FL 32809 Name and Title:	Name and Title: Address: Name and Title:
Name and Title: JAIRO A. NARVAEZ, DPTS	Name and Title: Address: Name and Title: Address:
Name and Title: Address:	Name and Title: Address: Name and Title: Address:
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: Address: ORLANDO FL 32809 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: JAIRO A. NARVAEZ 1111 EVANGELINE AVE. ORLANDO FL 32809 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: RUBEN D. TORO 7901 KINGSPOINTE PKWY STE. 31	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: JAIRO A. NARVAEZ Address: ORLANDO FL 32809 ARTICLE VII INCORPORATOR	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: JAIRO A. NARVAEZ Address: ORLANDO FL 32809 ARTICLE VII INCORPORATOR	
Address: ORLANDO FL 32809 ORLANDO FL 32809 ARTICLE VII INCORPORATOR	
ORLANDO FL 32809 ORLANDO FL 32809 ARTICLE VII INCORPORATOR	
ARTICLE VII INCORPORATOR	
ARTICLE VII INCORPORATOR	
Name: RUBEN D. TORO	
7901 KINGSPOINTE PKWY STE. 31 ω	
ORLANDO FL 32819	

Having been named as registered agent to accept service of process for the above stated corporation at the place designated this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	ted in
this terrificate, I am junitain with and accept the appointment as registered agent and agree to det in time capacity	
08/31/2015	
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	od in a
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	
08/31/2015	