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(Address)	
(City/State/Zip/Phone #)	
	09/27/1601032022 **105.00
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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T. SCOTT	



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 13, 2016

CHAIM PERL 8201 NW 93RD STREET MEDLEY, FL 33166

SUBJECT: PERCO INDUSTRIES INC Ref. Number: W16000067270

We have received your document for PERCO INDUSTRIES 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):

Please complete entire conversion application.

Please return 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.

Tyrone Scott Regulatory Specialist II

Letter Number: 516A00022072

www.sunbiz.org

## COVER LETTER

TO: Charter Section Division of Corporations SUBJECT:

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:

(N) Contact Person ( 0 Firm/Company State and Zip Code address: (to be used for future annual report notification) For further information concerning this matter, please call: 967 8566 305 Name of Contact Person rea Code and Daytime Telephone Number Enclosed is a check for the following amount: □\$113.75 Filing Fees □\$122.50 Filing Fees, □ \$105.00 Filing Fees □\$113.75 Filing Fees and Certified Copy Certified Copy, and and Certificate of Certificate of Status Status

## STREET ADDRESS:

New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS:

New Filings Section Division of Corporations P. O. Box 6327 Tallshassee, FL 32314

Certificate of Conversion For "Other Basiness 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:

SUVON GU AND PERCO INDUSTRIES LLC 🔔 👢 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 \_\_\_\_\_ (Enter state, or if a non-U.S. entity, the name of the country) 05/29/2015 on 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:

PERCO INDUSTRIES 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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Page 1 of 2



Signed thisday of	
Required Signature for Florida Profit Colooration:	
Signature of Chairman, Vice Chairman Bireptor, Officer, Incorporator: Printed Name: CHAIM PERI	or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business En	tity: [See below for required signature(s).]
Signature:	
Printed Name: CHAIM PBRL	Title: MGR
Signature: Ur MM	
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 Pa Signature of one General Partner.	artnership:
If Florida Limited Partnership or Limited Liability Li Signatures of ALL General Partners.	mited Partpership:
If Florida Linified Linbility Company. Signature of a Member or Authorized Representative.	
<u>All others:</u> Signature of an authorized person.	
Fees for Florida Articles of Incorporation: Certified Copy: • Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional) #ge 2 of 2

	ARTICLES OF INCO In compliance with Chapter 607 and		F.S. (Profit)	
ARTICLE I NAME The name of the corpora	tion shall be: Perco Indus	stries	Inc.	
ARTICLE II PRINC	CIPAL OFFICE Principal street address	·	Mailing address, if different is:	
8201 NW	93 street			
Medley	, FL 33166			
ARTICLE III PURPO The purpose for which t	25E he corporation is organized is:			
			- VV	مرینی میشود و میرونی میرونی مریکی میرونی مریکی میرونی مریکی میرونی
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·····			<u>ب</u> ې ح	111 111 111 111 111 111 111 111 111 11
				n na katalan na katala
The number of shares of <u>ARTICLE Y</u> INITLA Name and Title Address	L OFFICERS AND/OR DIRECTORS	Name and Title Address:	<u>chaim Perl</u> 8201 NW 933 Medley, FL	P T 33166
Name and Title:		Name and Title	ξ	
Address		_ Address:		·
Name and Title:		Name and Title		
Address		_ Address:		
		-		

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The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Name: <u>Choum Pelu</u> Address: <u>SODI NW 93 Street</u> <u>Medley, FL 33166</u>	
IRTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: <u>UNOUM PEIU</u> Address: <u>SDDI NW 93 Street</u> Medley, FL 33166	· · · · · · · · · · · · · · · · · · ·
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Name: <u>UQUM PEUL</u> Address: <u>SOU NW 93 Street</u> <u>MEDLEY, FL 33166</u>	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Name: <u>WOUM PEUL</u> Address: <u>SOOI NW 93 Street</u> <u>MECILLY, FL 33166</u>	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Name: <u>WOUM PEUL</u> Address: <u>SOOLNW 93 Street</u> <u>Medley, FL 33166</u>	
Medley, FI 33166	
Name: <u>Chaim Pell</u> Address: <u>SZOI NW 93 Street</u> <u>Medley, FL ZZI66</u>	
Address: <u>SDOI NW 93 Street</u> Medley, FI 33166	
Medley, Fi 33166	
<u>ARTICLE VII_INCORPORATOR</u>	
The <u>mame and address</u> of the Incorporator is: $(O \circ O + I)$	
Name: <u>Chaum PERC</u>	
Address: <u>DLOINWY3SI</u>	
Medlay, FL 33164	
ARTICLE VIII	
Effective date, if other than the date of filing: (OPTIONAL (If an effective date is listed, the date must be specific and cannot be more than five busin	L) ess days prior or 90 business
days after the filing.)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirement the document's effective date on the Department of State's records.	us, this date will not be listed as
	mation at the place device and i
Having been named as registered agent to accept service of process for the above stated corpo this certificate, I am familiar with and accept the appointment as registered agent and agree to	act in this capacity
<u> </u>	
Required Signifure/Registered Agent	Date
I submit this document and affirm that the facts stated herein are true. I am aware that the document to the Department of State constitutes a third degree felony as provided for in s.817.2	
Vi ju	
Required Signature/Incorporator	Date

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