P17000095323

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(Requestor's Name	e)
(Address)	
(Address)	
(City/State/Zip/Phc	one #)
	MAIL
(Business Entity N	ame)
(Document Numbe	er)
Certified Copies Certificat	tes of Status
Special Instructions to Filing Officer:	
W17-86540	
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FILED 17 NOV 29 AM II: 20 MULTICE OF STATE MULTICE OF STATE



T. BURCH DEC 1 2017

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COVER LETTER
TO: Charter Section
SUBJECT: LINTQUE CARPE ILE + UPHOLSTERY 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:
Nichael F. Ree
Contact Person
UNIQUE CARPET TILE + UPHOLSTERY
781 N.W.39 AUC
Lauderhill 712 3331] City. State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Liee 1959, 226-8348
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the to llowing amount:
\$105.00 Filing Fees \$113.75 Filing Fees \$\$113.75 Filing Fees \$\$122.50 Filing Fees. \$\$105.00 Filing Fees and Certificate of \$\$122.50 Filing Fees. \$\$Certified Copy \$\$Certified Copy \$\$Status \$\$Certificate of \$\$Status \$\$Certificate of \$\$Status \$\$
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301MAILING ADDRESS: New Filings Section



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 30, 2017

MICHAEL LEE 781 N.W. 39TH AVE LAUDERHILL, FL 33311

SUBJECT: UNIQUE CARPET TILE & UPHOLSTERY CLEANING INC Ref. Number: W17000086540

We have received your document for UNIQUE CARPET TILE & UPHOLSTERY CLEANING INC and your check(s) totaling \$114.00. 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.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

A corporation may hot act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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.

Tim Burch Regulatory Specialist

Letter Number: 217A00021842

www.sunbiz.org

Division of Componentions, DO POV 6297 Tallahaasaa Florida 29214



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2017

MICHAEL LEE 781 N.W. 39TH AVE LAUDERHILL, FL 33311

SUBJECT: UNIQUE CARPET TILE & UPHOLSTERY CLEANING INC Ref. Number: W17000086540

We have received your document for UNIQUE CARPET TILE & UPHOLSTERY CLEANING INC and your check(s) totaling \$114.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

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 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 III

Letter Number: 417A00022623

www.sunbiz.org

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Certificate of Conversion For FILED "Other Business Entity" Into 17 NOV 29 AM 11:20 Florida Profit Corporation eraky de state This Certificate of Conversion and attached Articles of Incorporation are submitted to conversion 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: arpet File **Business Entity** 2. The "Other Business Entity" is a <u>Limited Limbility Company</u> (Enter entity type. Example: limited liability company, limited partnership. general partnership, common law or business trust, etc.) HUIda first organized, formed or incorporated under the laws of _ (Enter state, or if a non-U.S. entity, the name of the country) 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: -A 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: LINICOLL Enter Name of Florida Profit Corporation, 5. If not effective on the date of filing, enter the effective date: $\underline{/}$ (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.) 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

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• • •				
	Signed thisday of	. 20		
	Required Signature for Florida			
	Signature of Chairman Vice the	airman. Director, Officer. or, if Directors or Officers have not been selected, an 22		
X	Printed Name: Althore	LEE Title: DURNER/CED		
	4	[[for Qther Business Entity: [See below for required signature(s).]		
	Signature: <u>Michel</u>	(e) (oo		
	Printed Name: Micha	el_leeTitle:		
	Signature:			
		Title:		
	Signature: NA			
	Printed Name: MA	Title:		
	Signature:			
	Printed Name: NA	Title:		
	Signature: NA			
	Printed Name:	Title:		
	Signature:A			
	Printed Name: N	Title:		
	If Florida General Partnership	or Limited Liability Partnership:		
	Signature of one General Partner			
	<u>If Florida Limited Partnership or Limited Liability Limited Partnership:</u> Signatures of <u>ALL</u> General Partners.			
	If Florida Limited Liability Čo	mpany:		
	Signature of a Member or Autho	rized Representative.		
	All others: Signature of ap authorized period			
	Fees:	lo		
	Certificate of Conversio Fees for Florida Articles			
	Certified Copy:	\$8.75 (Optional)		
	Certificate of Status:	\$8.75 (Optional)		
	1 1 1	Page 2 of 2		

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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	UNIQUE	CARPET	TILÉ	+	<u>LIPHOLSTERY</u>	LNC,
•	1 [*]					

ARTICLE IIPRINCIPAL OFFICEThe principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

781 Ale 233/ p ÷Λ

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

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	<u></u>
	
ARTICLE IV SHARES The number of shares of stock is:	6 / D 2 6 6 1 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	ú .
ARTICLE V INITIAL OFFI	CERS AND/OR DIRECTORS
same and Title: Michael	Lee DURNET Name and Title: N/A
701,1,1,294	TLED
Laudenhill	144 3331) · · · · · · · · · · · · · · · · · ·
/	
Name and Title: <u>N/-A</u>	Name and Title: N/L
Vddress:	Address:
	· · · · · · · · · · · · · · · · · · ·
Name and Title: N / Δ	Name and Title: MA
	L Address:
Address:	Audress:
<u></u>	

ARTICLE VI REGISTERED AGENT

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

PΡ Name: Address: A ρ_{V} ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: AlC Address: 733/ 01 τq 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 24 <u>1</u>219 Required Signature/Registered Agent

I submit this document and affirm¹ 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.

00 Required Signature/Incorporator

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