

P1800076997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

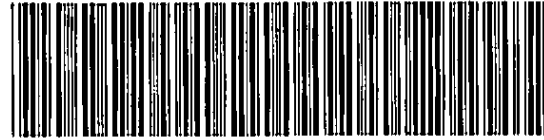
(Document Number)

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SEP 12 2018
FALLS CHURCH, VA
SECURITY

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Premiere Commercial Furniture & Design, 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:

Vicki M. Wolf
Contact Person

Premiere Commercial Furniture & Design
Firm/Company

160 Fitzgerald Rd., Ste. 3
Address

Lakeland, FL 33813
City, State and Zip Code

Accounting@pcf-d.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tena Weltz at (863) 648-2000
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 ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees,
#80.00 and Certificate of Status and Certified Copy Certified Copy, and
See Attached Certificate of 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
Tallahassee, FL 32314

18 SEP 12 PM 2:06
FILED
SEP 12 2006

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:

Premiere Commercial Furniture & Design, **LLC**

L05000066372

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 **Florida**
(Enter state, or if a non-U.S. entity, the name of the country)

on **6/28/2005**

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**:

Premiere Commercial Furniture & Design, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: **7/19/18**

(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.

18 SEP 12 PM 2:05
SECOND
FALL 2018

Signed this 19th day of July, 2019.

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: Vicki M. Wolf Title: Director

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

Signature: _____

Printed Name: Vicki M. Wolf Title: Director

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)

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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: Premiere Commercial Furniture & Design, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address
160 Fitzgerald Rd., Ste. 3

Lakeland, FL 33813

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The primary purpose of this Corporation is to provide professional business furniture purchases and resale.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Vicki M. Wolf Director

Address: 160 Fitzgerald Rd., Ste. 3

Lakeland, FL 33813

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

19 SEP 12 PM 2:06
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

ARTICLE VI REGISTERED AGENT

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

Name: Vicki M. Wolf
Address: 160 Fitzgerald Rd., Ste. 3
Lakeland, FL 33813

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Vicki M. Wolf
Address: 160 Fitzgerald Rd., Ste. 3
Lakeland, FL 33813

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

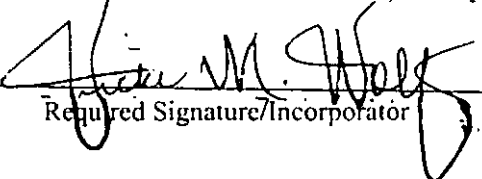


Required Signature/Registered Agent

8-15-18

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.



Required Signature/Incorporator

Date

18 SEP 12 PM 2:06
SECRET
TALLAHASSEE