P18000084482

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Office Use Only



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10/17/18--01018--015 **113.75



N CULLIGAN OCT 18 2018

COVER LETTER

Division of Corporations
SUBJECT: PHIMERO SENICES 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:
Eugenia Santana Contact Person
Primero Services Firm/Company
1163 ZERPIGNAN CT. Address
Lissimmer, 7 34759 City. State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Sugenia Santana at 724 965-8166 Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:

\$\sigma\$\$105.00 Filing Fees and Certificate of \$\sqrt{\$\sq}}}}}}}}}} \end{\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sq}}}}}}}}}} \end{\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sq}}}}}}}}}} \end{\sqrt{\$\sqrt{\$\sqrt{\$\sq}}}}}}}}} \end{\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{

STREET ADDRESS:

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

Status

Charter Section

MAILING ADDRESS:

Certificate of Status

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

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:
Privieno Cleaning LLC, L18-204594 Enter Name of Other Business Entity Exc =
Enter Name of Other Business Entity
ZS =
Enter Name of Other Business Entity 2. The "Other Business Entity" is a
(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 100000000000000000000000000000000000
first organized, formed or incorporated under the laws of Hohida
(Enter state, or if a non-U.S. entity, the name of the country) $\Xi \omega = \nabla$
first organized, formed or incorporated under the laws of $\frac{1}{10000000000000000000000000000000000$
on Hou Other Business Entity" was first organized, formed or incorporated
Tenter 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: Enter Name of Florida Profit Corporation Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:
(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.

Signed this 21 day of $5ept$.	. 20 1 8			
Required Signature for Florida Profit Corporation:				
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Printed Name: Title:	er, or, if Directors or Officers have not been selected, an			
Required Signature(s) on behalf of Other Business E				
Signature: Eugenia Soutan	10			
Printed Name:	Title:			
Printed Name: Susan DIAZ	Title:			
Signature:				
()	Title:			
Signature:				
Printed Name:	Title:			
Signature:	<u> </u>			
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 Signatures of ALL General Partners.	Limited Partnership:			
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.				
All others: Signature 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)

The name of the corporation shall be: Primero	Services Corp	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		
Missimmee 71 34759	Mailing address, if different is:	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	2018 OCT 17 SECAL AHASS	FIL
	PHIZ: 4	EI D
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND/OR DIRE		Partner
	Name and Title Magaina Soutan Address: 1163 Perpignans	10
ame and Title:	Name and Title:	,
ddress:	Address:	
me and Title:	Name and Title:	
idress:	Address:	

The name	ne and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	Cheyenne Moseley, US Coap Agents : United States Coaporagents, Inc	
Address:	: United States Corporation	
	13302 Winding Oak Court A Tamp	a 7L 331012
ARTICI	LE VII INCORPORATOR	
The name	ne and address of the Incorporator is:	
Name:	Susan Diews	
Address:	3169 TAMAVIYE CIR	
	Kissimmer, FC 34747	
	been named as registered agent to accept service of process for the above stated corporate. Lam familiar with and accept the appointment as registered agent and agree to Required Signature/Registered Agent Date	act in this capacity
Ib	t this decreases and affirm that the facts stated harries are true. I am much that are	false information submitted in a
	t this document and affirm that the facts stated herein are true. I am aware that any nTto the Department of State constitutes a third degree felony as provided for in s.817.	jaise injormation submutea in a .155, F.S.
	> Dian 9-18-	false information submitted in a 155, F.S. 2018 OCT 17 PH 12: 47 SECRETARY OF STATE ORDER
1	Required Signature Incorporator Date	2018 SE FAL
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		SECTION M
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ARTICLE VI REGISTERED AGENT