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PICK-UP	WAIT	MAIL			
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Certified Copies	_ Certificate	es of Status			
Special Instructions to Filing Officer:					
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2020

THOMAS HABEL 4429 CLUB ESTATES DR NAPLES, FL 34112

SUBJECT: QUALITY SALES INC. Ref. Number: W20000110036

We have received your document for QUALITY SALES INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Matthew T Moon
Regulatory Specialist II Supervisor

Letter Number: 920A00018365

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www.sunbiz.org

#### COVER LETTER

New Filing Section
Division of Corporations

TO:

SUBJECT: QUALITY SALES INC.						
	esulting Florid	da Profit	Corporation			
The enclosed Articles of Conversion, Articles of I entity into a "Florida Profit Corporation" in accord				the folio	wing eli	igible
Please return all correspondence concerning this n	natter to:					
THOMAS HABEL						
Contact Person						
QUALITY SALES INC.						
Firm/Company	<del></del>	<u> </u>				
4429 CLUB ESTATES DRIVE	• •					
Address						
NAPLES, FL 34112						
City, State and Zip Code	-	_				
THH6741@gmail.com						
E-mail address: (to be used for future annual	report notific	ation)				
For further information concerning this matter, ple	ase call:					
THOMAS HABEL a	τ <sub>ι</sub> 706	_,436	6-3453	_		
Name of Contact Person	Area (	Code and	Daytime Telephone Nur	nber		
Enclosed is a check for the following amount:						
	∃\$113.75 Fili nd Certified C	_	■\$122.50 Filing Fees, Certified Copy, and Certificate of Status	<u> </u>	2020	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New F Division The Co 2415 N	Address: Tiling Section on of Corporations entre of Tallahassee N. Monroe Street, Suite assee, FL 32303	810	10 CT 28 PM 12: 10	

## Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
QUALITY SALES INC.
Enter Name of the Converting Entity
2. The converting entity is a S-CORPORATION
(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 GEORGIA
(Enter state, or if a non-U.S. entity, the name of the country)
on 12/29/1997
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> :  QUALITY SALES INC.
Enter Name of Florida Profit Corporation
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.
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 Florid 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.

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Signed this 24TH day of AUGUST Required Signature for Florida Profit Corporation: Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Printed Name: THOMAS HABEL Title: PRESIDENT Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).] Signature: Printed Name: THOMAS HABOL Title: MEN MEMBER 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:

\$35.00

\$70.00

\$8.75 (Optional)

\$8.75 (Optional)

Articles of Conversion:

Certificate of Status:

Certified Copy:

Fees for Florida Articles of Incorporation:

#### ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of t	NAME the corporation shall be: QUALITY SA	LES INC		<del>_</del>		
ARTICLE I	I PRINCIPAL OFFICE place of business/mailing address is:					
	Principal street address	Maili	Mailing address, if different is:			
4429 CI	LUB ESTATES DRIVE					
NAPLE	S, FL 34112			·		
• •	n purpose for which the corporation is organized is: epresentative for various p	roducts.				
ARTICLE I	v shares f shares of stock is: 500					
ARTICLE 1	OFFICERS AND/OR DIRECTORS					
Name and Tit	te: THOMAS HABEL, PRESIDENT	Name and Title:				
Address:	4429 CLUB ESTATES DR	Address:				
	NAPLES, FL 34112					
Name and Tit	le:	Name and Title:		<b>2820</b> OCT		
Address:		Address:		007 28		
Name and Tit	le:	Name and Title:		P# 12:		
Address:		Address:	, <u></u>	· · · · · · · · · · · · · · · · · · ·		
		-		_ <del></del>		

ARTICLE VI REGISTERED AGENT

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

Name:

THOMAS HABEL

Address:

4429 CLUB ESTATES DR

NAPLES, FL 34112

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

08/24/2020

Date