

P13000079973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

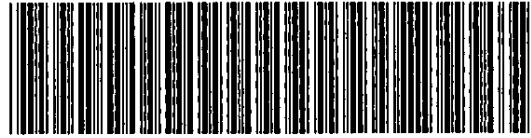
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100249822811

09/25/13--01022 --021 **113.75

FILED
13 SEP 25 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
9/27/13

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: LONG'S CLEANING SERVICE, INC

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:

OLIVET LONG

Contact Person

LONG'S CLEANING SERVICE

Firm/Company

PO BOX 1581

Address

SEBRING, FLORIDA 33871

City, State and Zip Code

PETELYON.BOOKKEEPING@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OLIVET LONG at (863) 658-1667

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

Ok

\$105.00 Filing Fees

\$113.75 Filing Fees
and Certificate of
Status

\$113.75 Filing Fees
and Certified Copy

\$122.50 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

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

MAILING ADDRESS:

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

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

FILED

13 SEP 25 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

LONG'S CLEANING SERVICE, LLC LI2000005902

Enter Name of Other Business Entity

2. The "Other Business Entity" is a **LIMITED LIABILITY COMPANY**
(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 **JANUARY 12, 2012**

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:**

LONG'S CLEANING SERVICE, INC

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: **OCTOBER 1, 2013**
(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.)

Signed this 21 day of September, 2013.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: *Olivet Long*
Printed Name: Olivet Long Title: Incorporator

FILED
13 SEP 25 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Signature: *Olivet Long*
Printed Name: Olivet Long Title: MGRM

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) ✓

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME LONG'S CLEANING SERVICE, INC
The name of the corporation shall be:

FILED
13 SEP 25 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE
The principal place of business/ mailing address is:

Principal street address
3019 SABAL PAM DRIVE
SEBRING, FLORIDA 33870

Mailing address, if different is:
PO BOX 1581
SEBRING, FLORIDA 33870

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES 100
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: OLIVET LONG, PRESIDENT
Address: 3019 SABAL PALM DRIVE
 SEBRING, FLORIDA 33870

Name and Title: _____
Address: _____

Name and Title: HAROLD LONG VICE PRESIDENT
Address: 3019 SABAL PALM DRIVE
 SEBRING, FLORIDA 33870

Name and Title: _____
Address: _____

Name and Title: WILLIAM LONG SECRETARY
Address: 3019 SABAL PALM DRIVE
 SEBRING, FLORIDA 33870

Name and Title: _____
Address: _____

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

Name: OLIVET LONG
Address: 3019 SABAL PALM DRIVE
 SEBRING, FLORIDA 33870

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: OLIVET LONG
Address: 3019 SABAL PALM DRIVE
SEBRING, FLORIDA 33870

FILED
13 SEP 25 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

● *Olivet Long*
Required Signature/Registered Agent

09/21/2013
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.

● *Olivet Long*
Required Signature/Incorporator

09/21/2013
Date