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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

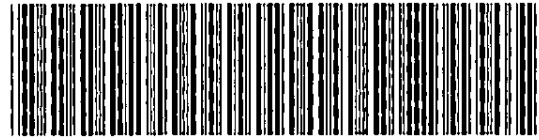
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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STATE  
FILE

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Principal Way Investments, Inc.  
Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Louis V. Schiavo, Jr.  
Contact Person

Principal Way Investments, Inc.  
Firm/Company

5414 Central Florida Pky  
Address

Orlando, FL 32821  
City, State and Zip Code

lvschiavo@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louis V. Schiavo Jr. at ( 407 ) 744-1621  
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 and Certificate of Status
- \$113.75 Filing Fees and Certified Copy
- \$122.50 Filing Fees, Certified Copy, and Certificate of Status

**Mailing Address:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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**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:

Principal Way Investments, LLC

Enter Name of the Converting Entity

2. The converting 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 March 06, 2018  
Enter date "Converting Entity" was first organized, formed or incorporated.

3. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

Principal Way Investments, 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 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.

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

**ARTICLE I NAME**

The name of the corporation shall be: Principal Way Investments, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

Principal street address

Mailing address, if different is:

5414 Central Florida Pky  
Orlando, FL 32821

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To engage in any and all lawful business for which corporations may be incorporated.

The Corporation is also organized for the purposes of performing real estate brokerage services.

**ARTICLE IV SHARES**

The number of shares of stock is: 300

**ARTICLE V OFFICERS AND/OR DIRECTORS**

Name and Title: Louis V. Schiavo, Jr., President/Chairman of the Board

Address: 8162 Elion Street  
ORLANDO, FL 32827

Name and Title: VICTOR R FORNARI, Vice President/Treasurer/Secretary

Address: 5305 FOREST BREEZE COURT  
SAINT CLOUD, FL 34771

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

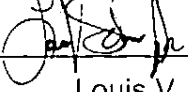
Address: \_\_\_\_\_

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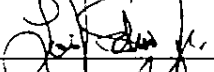
Signed this 14th day of September, 2020.

**Required Signature for Florida Profit Corporation:**

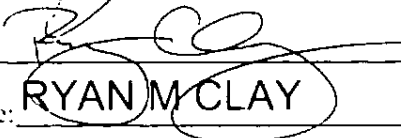
Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

  
Printed Name: Louis V. Schiavo, Jr. 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: LOUIS V SCHIAVO JR Title: COO

Signature: \_\_\_\_\_  
Printed Name: VICTOR R FORNARI Title: CEO

Signature:   
Printed Name: RYAN M CLAY Title: President

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:**

Articles 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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**ARTICLE VI REGISTERED AGENT**

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

Name: Louis V. Schiavo, Jr  
Address: 5414 Central Florida Pky  
Orlando, FL 32821

\*\*\*\*\*

*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

09/14/2020  
Date

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STATE OF FLORIDA