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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

Division of Corporations				į.
SUBJECT: Stormpro Roofing LLC				
5 (12) S (1)	sulting Florida Li	mited Co	mpany)	_
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li	_			
Please return all correspondence concernin	g this matter to	D:		
Frank Rehberger				
(Contact Person)				!
Stormpro Roofing				
(Firm/Company)				
8751 Weslyan Dr #1818				
(Address)	-			
Fort Myers. FL 33919				
. (City, State and Zip Code)				
hailpros@gmail.com				
E-mail Address: (to be used for future annual re	port notifications)		1
For further information concerning this ma	tter, please cal	1:		
Frank	_at (3778	3649	
(Name of Contact Person)	(Area Cod	de) (Day	ytime Telephone Number)	
Enclosed is a check for the following amou dollars and drawn on a bank located in the		s proces	sed by this office must	be payable in US
\$\\$\\$\$150,00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\\$\\$\$150,00 Filing Fees and Certificate of Status	□\$180,00 Fili and Certified C		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N Monroe Street, Suit	te 810

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with \$.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles Stormpro Roofing LLC	of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LLC	78
(Enter entity type. Example: corporation, limited partnership, general partnership, common la	
First organized, formed or incorporated under the laws of	
	me of the country)
01/10/2019 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles	s of Organization:
Stormpro Roofing LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 $lpha$	alendar 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 widocument's effective date on the Department of State's records.	II not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statutes.	
 The "Converted or Other Business Entity" has agreed to pay any members having appraisal r which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S. 	ights the amount to
	5-1 63

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Signed this 20th day of May 2020	20
Signature of Authorized Representative of	of Limited Liability Company:
Signature of Authorized Representative:	France - The
Signature of Authorized Representative: Printed Name: Frank Refiberger	Title: Owner
Signature(s) on behalf of Other Business E	ntity: [See below for required signature(s)]
Signature: <	
Printed Name: Eric Rehberger	Title: Owner
Printed Name:	Title:
	<u> </u>
Printed Name:	Title:
Signature: Printed Name:	Title:
	1
Signature:	Title:
Printed Name;	rme:
Signature:	Title:
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected	
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:
If Florida Limited Partnership or Limited . Signatures of <u>ALL</u> General Partners.	Liability Limited Partnership:
All others: Signature of an authorized person.	district the state of the state

\$25,00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees:

Articles of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: 20 MAY 22 PH 5: 05

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Compa	any is.	
Stormpro Roofing LLC		
(Must contain the words "Lunited	Haability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited L	iability Company is
Principal Office Address:	Mailing Address:	
8751 wesleyan dr	same as principle office	
#1818		
fort myers, fl 33919		
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Eric Rehberger	on Registered Agent. You must designate an indiv	ridual or another
	Name	
8751 Wesleyan Dr #1818		TILLET
Florida street addres	s (P.O. Box <u>NOT</u> acceptable)	
Fort Myers	FL 33919	: 06
City	Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-	
The name and address of each person authorized to manage and contro	of the Limited Liability
Company:	

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager AAMBR	Frank Rehberger		
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(Use attachment if necessary)			0
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TCLE V: Other provisions, if any.		•	3
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REQUIRED SIGNATURE:			•
REQUIRED SIGNATURE	\sim //		
			1
Signature of a member or a This document is executed in accordance vany false information submitted in a docum as provided for in s.817.155, F.S.	n authorized representative (with section 605,0203 (1) (b), Florida ent to the Department of State consti	i Statutes, Lam	aware tha
Frank Rehberger			
	ed or printed name of signee	·	1

Filing Fees
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)