L20000376344

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PICK-UP WAIT MAIL
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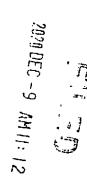


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FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

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DATE:

12/9/20

NAME:

EVANS ROOFING OF CENTRAL FLORIDA, INC

TYPE OF FILING: CONVERSION

COST: 150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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 s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: EVANS ROOFING OF CENTRAL FLORIDA, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of FLORIDA P20000 88235 (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
NOVEMBER 3, 2020
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
EVANS ROOFING OF CENTRAL FLORIDA, 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 calendar 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.
5. The plan of conversion has been approved in accordance with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this day of DECEMBER	20 <u> 20</u>
Signature of Authorized Representative of Lin	ited Liability Company:
Signature of Authorized Representative:	
Printed Name: FREDERIC M. BARTHE, ESQ.	Title: _ Aderna
Signature(s) on behalf of Other Business Entity:	See below for required signature
Signature:	,
Printed Name: AHERRY DEVOVE	Title: PRESIDENT
	The Theologia
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Tide:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title
	1 lue
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
Temada estados	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
organical of the deficial Lattice.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnershin:
Signatures of ALL General Partners.	The state of the s
All others	
All others: Signature of an authorized person.	
organical or an audionzed person.	
Fees:	
Articles of Conversion:	\$ 25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
	#J.UV (UDLIUIIZI I

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

EVANS ROOF	ING OF CENTRAL FLORIDA, L	LC. iability Company, "L.L.C.," or "LLC.")			
	(Must contain the words Limited L	lability Company, "L.L.C.," or "LLC.")			
ARTICLE II The mailing a		ne principal office of the Limited	Liability Cor	npany i	s:
Principal Off	ice Address:	Mailing Address:	·		
1071 NE 43RD	STREET	1071 NE 43RD STREET			
OAKLAND PAF		OAKLAND PARK FL 33334			
The name and	the Florida street address of t	he registered agent are:		ຈັກຈຸກ DEC – 9	<u> </u>
	N	ame			•• و ز
	17 SE 24TH AVE, 2ND FL	.OOR	-	AM II:	, . .
		P.O. Box NOT acceptable)	- :	: 12	
	POMPANO BEACH	FL 33062	•	2	
	City	Zip			

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	THIERRY DEVOVE
	1071 NE 43RD STREET
	OAKLAND PARK FL 33334
MGR	IVONNEY MARTINEZ
	1071 NE 43RD STREET
	OAKLAND PARK FL 33334
	
(I lee attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any. REOUIRED SIGNATURE	
REQUIRED SIGNATURE	
Signature of a member or an This document is executed in accordance w	a authorized representative of a member ith section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel
Signature of a member or at This document is executed in accordance wany false information submitted in a docume as provided for in s.817.155, F.S.	ith section 605.0203 (1) (b), Florida Statutes. I am aware t int to the Department of State constitutes a third degree fel
Signature of a member or an This document is executed in accordance wany false information submitted in a docume as provided for in s.817.155, F.S.	ith section 605 0203 (1) (b). Florida Statutes, Lem numes o

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-