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Office Use Only

G. MCLEOD

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**EXAMINER** 



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10 OCT 19 PM 4: 02 SECRETARY OF STATE ALLAHASSEE, FLORIOA

# **COVER LETTER**

Tallahassee, FL 32301

TO: Registration	n Section Corporations		
•	•	INC	
SUBJECT: Sap	ohire Construction, Name of R	Resulting Florida Profit Cor	poration
			, and fees are submitted to convert an cordance with s. 607.1115, F.S.
Please return all co	rrespondence concernin	g this matter to:	
Lashford L. Lo	OWE  Contact Person		
Sapphire Co	nstruction, INC		
1740 SW 68th	Firm/Company  Avenue		
17,10 071 0011	Address	······································	
Plantation, FL	33317 City, State and Zip Code		
III.lowe@att.r	et to be used for future annual r	eport notification)	
For further informa	ation concerning this ma	tter, please call:	
Lashford L. Lov		//	2.1329
Name of C	ontact Person	Area Code and Dayti	me Telephone Number
Enclosed is a check	k for the following amou	ınt:	
<b>☑</b> \$105.00 Filing Fee	s \$\Bigsiz\$\$\square\$\$\$\$\$\square\$	■\$113.75 Filing Fees and Certified Copy	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRE Registration Section Division of Corpora Clifton Building	en de la companyations	MAILING A Registration Division of C P. O. Box 63	Section Corporations 27

## **Certificate of Conversion**

For

## "Other Business Entity"

Into

### Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:

Sapphire Construction, LLC		
Enter Name of Other Business Entity	<u> </u>	
2. The "Other Business Entity" is a limited liability company	HET.	
(Enter entity type. Example: limited liability company, limited partnership, common law or business trust, etc.)	<	7
first organized, formed or incorporated under the laws of Florida	<u> </u>	•
(Enter state, or if a non-U.S. entity, the name of the country)	4:02	-
on July 2, 2010		
Enter date "Other Business Entity" was first organized, formed or incorporate	Ł	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under which it is now organized, formed or incorporated:	the la	ws of
n/a		
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incor	<u>porati</u>	ion:
Sapphire Construction, INC		
Enter Name of Florida Profit Corporation		

- 5. If not effective on the date of filing, enter the effective date: October 15, 2040.

  (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.)
- 6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.
- 7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

<b>V</b>					
Signed this Friday. day of October 15	, 2010				
Required Signature for Florida Profit Corporation: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.					
Signature of Chairman, Vice Chairman Director Officer, of H Directors or Officers have not been selected, an Incorporator:  Printed Name: Lashford L Lowe					
Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]					
Signature: Printed Name: Lashford L. Lowe					
Signature: Printed Name:	Title:				
Signature:Printed Name:	Title:				
Signature:Printed Name:	Title:				
Signature:Printed Name:					
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: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)				

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

The name of the corpo	AME Dration shall be: Sapphire	Cons	truction, INC
ARTICLE II P	RINCIPAL OFFICE		
1740 5\/	Principal <u>street</u> address 68th Avenue		Mailing address, if different is:
Plantation, F			
ARTICLE III PU	URPOSE the the corporation is organized is:		
Any	and all La	wful	Business
ARTICLE IV S. The number of shares	HARES of stock is: 1000		
	NITIAL OFFICERS AND/OR DIRECT		
	Lashford L. Lowe, President and Director		:
Address:	1740 SW 68th Avenue Plantation, FL 33317	Address:	
Name and Title	:	Name and Title	<u>.</u>
Address:			
Name and Title	:	Name and Title	e:
Address:		Address:	
		_	Lashford L. Lowe
		<del></del>	Eddinoro E. EUNO
	EGISTERED AGENT		
	la street address (P.O. Box NOT acceptable	) of the registered age	ent is:
Name: Address:	Lashford L. Lowe 1740 SW 68th Avenue		
rtuui 035.	Plantation, FL 33317		
	VCCDDOD 4 FOR	· <del></del>	
	VCORPORATOR ss of the Incorporator is:		
Name:	Lashford L. Lowe		
Address:	1740 SW 68th Avenue		
	Plantation, FL 33317		
	as registered agent to accept service of proc familiar with and accept the appointment as	registered agent and	agree to act in this capacity
		10/1	5/2010
Require	1-Signature/Registered Agent	/Date	
I submit this docume	ent and affirm that the facts stated herein a	re true. I am aware	that any false information submitted in a
document to the Depo	artment of State constitutes a third degree fel	lony as provided for	in s.817.155, F.S.
	4 9/// "	11/	
	6: / /	10/	5/2010
Required	Signatúre/Incorporator	/ Dat	ie/