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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				
Special Instructions to Filing Officer:				

Office Use Only

G. MCLEOD

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EXAMINER



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SECRETARY OF STATE
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Efficient Quality Service Home Maintenance, 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: **Justin Douglas** Contact Person Efficient Quality Service Home Maintenance, Inc. Firm/Company 2485 Dew Drop Inn Lane Address Tallahassee, FL 32305 City, State and Zip Code eq155000@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Justin Douglas 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 □\$113.75 Filing Fees ✓\$122.50 Filing Fees, and Certificate of and Certified Copy Certified Copy, and

STREET ADDRESS:

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

Status

MAILING ADDRESS:

Certificate of Status

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

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:

DOUGLAS PAINTING & MOBILE HOME REPAIRS LLC

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.)

(Enter state, or if a non-U.S. entity, the name of the country)

on 01/14/2004

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:

N/A

4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u>:

Efficient Quality Service Home Maintenance, Inc.

Enter Name of Florida Profit Corporation

- 5. If not effective on the date of filing, enter the effective date: N/A

 (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.

Signed th	nis <u>03</u>	_day of July	, 20_12	
Require	d Signature	for Florida Profit Corporat	ion:	
			is document are true. Any false information	ation constitutes
		as provided for in s.817.155,		ation constitutes
a umu uc	egree lelony	as provided for in s.617.133,	1.5.	
_			Officer, or, if Directors or Officers have	not been
		ator:		
Printed N	Name: Justin	Douglas Title:	Chief Executive Officer & Chairman	
Required	l Signature(s	s) on behalf of Other Business	s Entity: Individual(s) signing affirm(s)	that the facts
stated in	this docume	nt are true. Any false informa	tion constitutes a third degree felony as	provided for in
s.817.155	5. F.S. See b	pelow for required signature(s).	1	•
	· / 1 '	\wedge \circ	•	
Signature	: Com	of Value		
Printed M	ame: James D	Douglas	Title: MGRM	
i illited iv	airre-	-	Title. Moran	
C: amatuma				
Deinted M	Isman Justin C	Douglas	Title: MGRM	
Ciamatura			Title:	
Deintad N			Title	
Printed N	iame:	 	Title:	
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If Florids	a Limited Li	ability Company:		
		r or Authorized Representative		
Signature	or a wichide	of Authorized Representative	•	
All other	•			
Signature	of an author	ized nercon		
Signature	or an aumor	ized person.		
Foor				
Fees:	autifia-t f	Conversion	#25 AA	
	ertificate of		\$35.00	
		da Articles of Incorporation:	\$70.00	
	ertified Copy	<i>*</i>	\$8.75 (Optional)	
C	ertificate of	Status:	\$8.75 (Optional)	

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

ARTICLE I	NAME	slity Convice Home Maintenance Inc
The hame of the C		ality Service Home Maintenance, Inc.
ARTICLE II	PRINCIPAL OFFICE	
	Principal street address	Mailing address, if different is:
	w Drop Inn Lane	2485 Dew Drop Inn Lane
Tallahasse	ee, FL 32305	Tallahassee, FL 32305
ARTICLE III	DIDDOCF	
	hich the corporation is organized is:	
F F		
Hoi	me Main	itenance
4 D. W. C. L. W.	arra maa	
ARTICLE IV	SHARES	
The number of share	res of stock is: 100	
ARTICLE V	INITIAL OFFICERS AND/OR DIRE	PCTODS
	te: Justin Douglas, Chief Executive Officer & Chairman	Name and Title:
Address:	· · · · · · · · · · · · · · · · · · ·	
Audress.	2485 Dew Drop Inn Lane	Address:
	Tallahassee, FL 32305	
Name and Ti	tle- James Douglas, Chief Operating Officer	Name and Title:
Address:	2479 Dew Drop Inn Lane	Address:
	Tallahassee, FL 32305	1100.005.
Name and Ti	tle:	Name and Title:
Address:		Address:
		Justin Douglas
	REGISTERED AGENT	
The <u>name and Flo</u>	rida street address (P.O. Box NOT accep	table) of the registered agent is:
Name:	Justin Douglas	
Address:	2485 Dew Drop Inn Lane	
	Tallahassee, FL 32305	
ARTICLE VII	<u>INCORPORATOR</u>	
The <u>name and add</u>	Iress of the Incorporator is:	
Name:	Justin Douglas	
Address:	2485 Dew Drop Inn Lane	
	Tallahassee, FL 32305	
Having been name this certificate, I an	ed as registered agent to accept service of n familiar with and accept the appointmen	f process for the above stated corporation at the place designated in nt as registered agent and agree to act in this capacity
-		07/03/2012
D	16: 16	
Kequi	red Signature/Registered Agent	Date
I submit this document to the De	ment and affirm that the facts stated her epartment of State constitutes a third degr	ein are true. I am aware that any false information submitted in a ee felony as provided for in s.817.155, F.S.
		07/03/2012
Require	ed Signature/Incorporator	Date