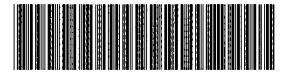
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(Requestor	s Name)
(Address)	
(Address)	
(City/State/Z	Zip/Phone #)
. PICK-UP	VAIT MAIL
(Business E	intity Name)
(Document	Number)
Certified Copies Ce	ertificates of Status
Special Instructions to Filing Of	ficer:
•	

Office Use Only

EFFECTIVE DATE 0/01/12



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SECRETARY OF STATE

APPROVED AND FILFN

D. BRUCE

SEP 0 4 2012

EXAMINER

COVER LETTER

Registration Section

Tallahassee, FL 32301

Division of Corporations

SUBJECT: AA ACTION DOOR ENTERPRISE INC

TO:

	Name of R	Resulting Florida Profit Cor	poration	
			, and fees are submitted to cordance with s. 607.1115	
Please return all corre	espondence concernin	g this matter to:		
ORLAND W HIC	KS	· , , ,		
	Contact Person			
AA ACTION DO	OOR ENTERP	RISE INC		
	Firm/Company			
2650 SAND LAKE	RD			
	Address			
LONGWOOD, FI				SEC
C	ity, State and Zip Code			22
aaactiondoor@c	gmail.com be used for future annual r	eport notification)		ASSEE.
For further information	on concerning this ma	tter, please call:		TLOR STA
CAROL D CLARK	E	at (352) 735	i-0400	ŞA
Name of Con	tact Person		me Telephone Number	•
Enclosed is a check f	or the following amou	ınt:		
I \$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	
STREET ADDRESS	<u>8:</u>	MAILING A		
Registration Section		Registration 8		
Division of Corporati Clifton Building	ons	Division of C P. O. Box 63		
2661 Executive Center	er Circle	Tallahassee,		

APPROVEL AND FILED

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: AA ACTION DOOR LLC Enter Name of Other Business Entity 2. The "Other Business Entity" is a LLC (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 JUNE 7, 2011 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 or which it is now organized, formed or incorporated: **FLORIDA** 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: AA ACTION DOOR ENTERPRISE INC Enter Name of Florida Profit Corporation 5. If not effective on the date of filing, enter the effective date: 09/01/2012 (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

Page 1 of 2

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

EFFECTIVE DATE 09/81/12

currently organized, formed or incorporated.

conversion.

12 AUG 3 I	APPR AI FIL
PM 12: 08	APPROVED AND FILED

Signed this 28 day of AUGUST	<u>′</u> , 20 <u>12</u> .	
,		
Required Signature for Florida Profit Corporat		
Individual signing affirms that the facts stated in th	is document are true. Any false informa	ation constitutes
a third degree felony as provided for in s.817.155, l	F.S.	
Signature of Chairman, Vice Chairman, Director, C	Officer, or, if Directors or Officers have	not been
selected, an Incorporator:		
selected, an Incorporator: Printed Name: ORLAND W HICKS Title:	PRESIDENT	
Required Signature(s) on behalf of Other Business		
stated in this document are true. Any false informat		provided for in
s.817.155, F.S. [See below for required signature(s).]]	
00000		
Signature: Dolland W Hicks		
Printed Name: ORLAND W HICKS	_ Title: PRESIDENT	
Signature:Printed Name:	en' d	
Printed Name:	little:	
Ciamatora		
Signature:Printed Name:	Title	
rinted Name:	_ inc.	
Signature:		3
Signature:Printed Name:	Title:	4
		<u> </u>
Signature:		30 37
Signature:Printed Name:	Title:	SS AS
Signature:Printed Name:		
Printed Name:	Title:	ران در ا
TATE 11 0 10 10 10 11 11 11 11 11 11 11 11 1	A. D. A L'	MI2: 08 OF STATE OF LORID
If Florida General Partnership or Limited Liabilit	y Partnersnip:	> . ω
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabilit	ty Limited Dartnership	
Signatures of <u>ALL</u> General Partners.	y Limited I at theismp.	
bigilatures of ADD Ocheral 1 artifers.		
If Florida Limited Liability Company:		
Signature of a Member or Authorized Representative	<i>.</i> .	
All others:		
Signature of an authorized person.		
- ·		
Fees:		
Certificate of Conversion:	\$35.00	
Fees for Florida Articles of Incorporation:	\$70.00	
Certified Copy:	\$8.75 (Optional)	
Certificate of Status:	\$8.75 (Optional)	

ARTICLES OF INCORPORATION

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

ARTICLE II	PRINCIPAL OFFICE	ON DOOR ENTER	•
2000 0	Principal <u>street</u> address AND LAKE RD	Mailing address,	if different is:
	OOD, FL 32779	2650 SAND LAKE RD LONGWOOD, FL 32779	
		<u> </u>	
ARTICLE III The purpose for w	PURPOSE hich the corporation is organized is:		
TO CONDU	JCT ALL LEGAL BUSINES	SS IN THE DOOR INSTALLAT	TION INDUSTRY.
ARTICLE IV	SHAPES		
The number of share			
APTICI P V	INITIAL OFFICERS AND/OR DI	DECTODO	
	tle; ORLAND W HICKS	Name and Title:	
Address:	2850 SAND LAKE RD	Address:	
	LONGWOOD, FL 32779		
Name and Ti	tle;	Name and Title:	
Address:		Address:	
			
Name and Ti Address:		Name and Title:	
Address:			
		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	REGISTERED AGENT		12 SEC
The <u>name and Flo</u> Name:	rida street address (P.O. Box NOT acc ORLAND WHICKS	• ,	AUG CRET LATH
Address:	2850 SAND LAKE RD		
	LONGWOOD, FL 32779		ARN ASS
4 D. STOL D. 1977	TIMOPPOR A MOD		PA EG
	INCORPORATOR iress of the Incorporator is:		
Name:	ORLAND W HICKS		807. Vis S.
Address:	2650 SAND LAKE RD LONGWOOD, FL 32779		09 RID#
		of process for the above stated corporation tent as registered agent and agree to act in th	
in 1	1. M.M. (/2)	00/00/0010	
- W 540	and the House	08/28/2012	
Kequi	red Signature/Registered Agent	Date	
		erein are true. I am aware that any false in	
document to the De	epartment of State constitutes a third de	gree felony as provided for in s.817.155, F.S.	
	// /1/Mulas	00/00/04 00	
	ed Signature/Incorporator	<u> </u>	

EFFECTIVE DATE 09/01/12