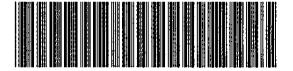
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Office Use Only



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COVER LETTER

TO: Charter S Division	Section of Corporations		
SUBJECT:	JOSIAS R ROOFING,	CORP.	
	Name of Resulting	Florida Profit Corporation	
	ertificate of Conversion, Arti ter Business Entity" into a "F	-	
Please return all	correspondence concerning	this matter to:	
ADA	E RODRIGUEZ		
	Contact Person		
		 	
	Firm/Company		
1828	NW 5th Street		
	Address		
Miami	i, FL 33125		
	City, State and Zip Code		
E-mail addres	ss: (to be used for future annual re	port notification)	
	rmation concerning this matt	·	
Ada E Rodi	riquez	at (<u>305</u>) 976	0-5057
	of Contact Person	Area Code and Daytim	e Telephone Number
Enclosed is a ch	neck for the following amoun	t:	
© \$105.00 Filing I	Fees \$113.75 Filing Fees and Certificate of Status		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADD Charter Section Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	MAILING AI Charter Section Division of Co P. O. Box 6327 Tallahassee, FI	rporations



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January 15, 2013

ADA RODRIGUEZ 1828 NW 5TH STREET MIAMI, FL 33125

SUBJECT: JOSIAS R ROOFING, CORP

Ref. Number: W13000003007

We have received your document for JOSIAS R ROOFING, CORP and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

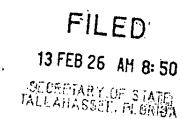
Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 113A00001147

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:
JOSIAS R. ROOFING LLC Enter Name of Other Business Entity
2. The "Other Business Entity" is a <u>Florida Limited Liability Company</u> (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 ofFLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)
onAugust 28, 2012
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:
Florida, USA
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
JOSIAS R ROOFING, CORP
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (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; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 4 day of February	, ₂₀ /3 FILED		
Required Signature for Florida Profit Corporation: 13 FEB 26 AM 8: 50			
Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors of Officers have mount been selected, an Incorporator: Officer, or, if Directors of Officers have mount been selected, an Incorporator: Officer, or, if Directors of Officers have mount been selected, an Incorporator: Officer, or, if Directors of Officers have mount been selected, an Incorporator: Officer, or, if Directors of Officers have mount been selected, an Incorporator: Officer, or, if Directors of Officers have mount been selected. Title: President MGRM			
Required Signature(s) on behalf of Other Business signature(s).	Entity: [See below for required		
• · · · · · · · · · · · · · · · · · · ·	Title: President		
Signature: Printed Name:	Title:		
Signature:Printed Name:			
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)

FILED

	tion shall be: JOSIAS R ROOI		13 FEB 26 AM 8: 50
ARTICLE II PRI	NCIPAL OFFICE Principal street address	Mailir	ng address if different is: pro leasen
1828 NW 5th	•		ng address if different is: OF STATE
Miami, FL 33	125		
ARTICLE III PUR The purpose for which t Commercial.	POSE he corporation is organized is:	, new, leak and me	tal roofing residential and
		12111	
ARTICLE IV SHA	ures 10		
	TIAL OFFICERS AND/OR DIRECT		
ARTICLE V INIT	rial officers and/or direct e: Ada E. Rodriguez,P/D/VP/T	Name and Title:	
ARTICLE V INIT	TIAL OFFICERS AND/OR DIRECT	Name and Title:	
ARTICLE V INT Name and Title Address	TIAL OFFICERS AND/OR DIRECTO Ada E. Rodriguez,P/D/VP/T 1828 NW 5th Street Miami, FL	Name and Title: Address:	
ARTICLE V INTO Name and Title Address	Ada E. Rodriguez,P/D/VP/T 1828 NW 5th Street Miami, FL	Address: Name and Title:	
ARTICLE V INT Name and Title Address	TIAL OFFICERS AND/OR DIRECTO Ada E. Rodriguez,P/D/VP/T 1828 NW 5th Street Miami, FL	Address: Name and Title:	
ARTICLE V INTO Name and Title Address	Ada E. Rodriguez,P/D/VP/T 1828 NW 5th Street Miami, FL	Name and Title:	
Name and Title Address Name and Title Address	Ada E. Rodriguez,P/D/VP/T 1828 NW 5th Street Miami, FL	Address: Name and Title: Address: Name and Title: Address:	
Name and Title Address Name and Title Address	Ada E. Rodriguez,P/D/VP/T 1828 NW 5th Street Miami, FL	Name and Title: Address: Name and Title: Name and Title: Name and Title:	

FILED

Name and	Title:	Name and Title:_	12 LED SP VW 8: 20
Address		Address: _	SECNETARY OF STATE
ARTICLE VI	REGISTERED AGENT	_	
	rida street address (P.O. Box NOT acceptable) of	the registered agen	t is:
Name:	Ada E Rodriguez		
Address:	1828 NW 5th Street		
	Miami, FL 33125		
ARTICLE VII	INCORPORATOR		
The name and add	<u>lress</u> of the Incorporator is:		
Name:	Ada E Rodriguez		
Address:	1828 NW 5th Street		
	Miami, FL 33125		
	ed as registered agent to accept service of process m familiar with and accept the appointment as reg		
(Costen)	edinin)		02/06/2013
<u> </u>	Bequired Signature/Registered Agent		Date
I submit this docu document to the D	ment and affirm that the facts stated herein are epartment of State constitutes a third degree felon	true. I am aware t y as provided for in	hat the false information submitted in a s.817.155, F.S.
Rosko	Required Signature/Incorporator		02/06/2013