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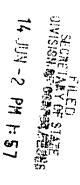
(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
<u>_</u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consideration to Ellino Officer
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: Charter Section

Division of Corporations

SUBJECT: Becker Holdings 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:
Matthew Becker Contact Person
Becker Holdings Inc Firm/Company
4870 Cross Pointe Or. Address
Oldsmar, Fl 34677 City, State and Zip Code
E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
Math Ricker at (727) 366-03/0 Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees and Certificate of Status \$113.75 Filing Fees and Certified Copy and Certificate of Status \$113.75 Filing Fees and Certified Copy and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filings Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

For "Other Business Entity" Into

Florida Profit Corporation

SECRETARY OF STATESHIN 14 JUN - 2 PH F 57

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.

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:
Recker Holdings, LLC
Becker Holdings, LLC Enter Name of Other Business Entity
2. The "Other Business Entity" is a Limited Liab, Lity Company (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 January 10 2014 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:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> R. J.
Becker Holdings Inc 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 27 day of May	, 20_///
Required Signature for Florida Profit Corporat	ion:
Signature of Chairman, Vice Chairman, Director, Cobeen selected, an Incorporator: Printed Name: Mallew Becker Title:	Officer, or, if Directors or Officers have not
Required Signature(s) on behalf of Other Business signature(s).]	Entity: [See below for required
Signature: Matthe Becker Printed Name: Matthe Becker	
Printed Name: Matthe Beck	Title: Manager
Signature: MULLIA BECKET Printed Name: AMANGA BECKET	•
Printed Name: AMANDA BECKET	Title: Manager
	•
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y <u>Limited Partnership:</u>
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)

ARTICLE I NAME The name of the corporation shall be: Secker Ho	ldings Inc
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	,
4890 (1055 Pointe Dr.	Mailing address, if different is:
Oldsmin, F1 34677	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: 6 Conduct business within t	he state of Florida
	TA JUN 18 CON 18
ARTICLE IV SHARES The number of shares of stock is: /// ()	-2 PH
ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS ST
Name and Title: Matthew Becker, Assidu	A Name and Title: Amanda Becker Vice President
Address: 4890 Cross Pointe Dr.	Address: 4890 Cross Binte Dr.
Oldsmar, F1 34677	Oldsmar, F1 34677
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acc	ventable) of the registered agent is:
Name: Matthew Becker	estimated or the respiration asserting.
Address: 4890 Cross Pointe Dr.	
11dema 51 24/77	

ARTICL	E VII INCO	RPORATOR		
The <u>name</u>	and address of t	he Incorporator is:		
Name:	Matthew	Becker		
Address:	4890 Cro	ss Pointe Dr.		
	Oldsmar	F/ 34677		
	,			
Having be designated capacity	en named as re I in this certificat	gistered agent to accept . e, I am familiar with and .	service of process for the accept the appointment as	*************** above stated corporation at the place registered agent and agree to act in this
Mi	the 1	Pul .		5/27/2014
	Required Sign	ature/Registered Agent		/ Date
				am aware that any false information dony as provided for in s.817.155, F.S.
Whole	the 1	Deed		5/27/2014
,	Required Sign	ture/Incorporator	•	Date