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(Ad	dress)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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SECRETARY SESTAFF.

Stoe C. L. Courses

COVER LETTER

TO: Charter Section

Division of Corporations

SUBJECT: TAPERED DESIGNS LLC

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:

ALBERT E SMITH

Contact Person

TAPERED DESIGNS LLC

Firm/Company

809 S ARNOLD AVE

Address

LANTANA, FL 33462

City, State and Zip Code

AL@TAPEREDDESIGNS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALBERT E SMITH

....561

662-7563

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

Status

■ \$105.00 Filing Fees

□\$113.75 Filing Fees and Certificate of

□\$113.75 Filing Fees and Certified Copy

□\$122.50 Filing Fees, Certified Copy, and Certificate of Status

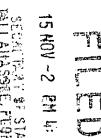
STREET ADDRESS:

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

MAILING ADDRESS:

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

Certificate of Conversion For "Other Business Entity"



This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in apparature with a 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:
TAPERED DESIGNS LLC LIY- 120859
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.)
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 JULY 31, 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 attached Articles of Incorporation:
TAPERED DESIGNS 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 thisday of OCTOBER	, 20 <u>15</u> .
Required Signature for Florida Profit Corpor	ation:
Signature of Chairman, Vice Chairman, Director been selected, an Incorporator: Printed Name: ALBERT E SMITH Title	Officer, or, if Directors or Officers have not
Required Signature(s) on behalf of Other Busin signature(s).]	ess Entity: [See below for required
• ',' ',	
Signature: ALBERT E SMITH	Title: PRES VP SEC TREAS
Frinted Name. Academic Source	Title. Theo, it, one, the
Signature:	
Printed Name:	1(12)
Signature:	
Printed Name:	Title:
G*	Title.
Signature:Printed Name:	Title:
Trince (vanie.	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liab	ility Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners.	ility Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representation	ve.
All others: Signature of an authorized person.	
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation Certified Copy: Certificate of Status:	\$35.00 a: \$70.00 \$8.75 (Optional) \$8.75 (Optional)

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

ARTICLE The name of	of the corporation shall be: TAPERED D	DESIGNS IN	C	_	
ARTICLE					
	Principal street address		Mailing address, if different is	ı;	
809 S	ARNOLD AVENUE				
LANTA	ANA, FL 33462				
=	EM PURPOSE se for which the corporation is organized is: AND ALL LAWFUL BUSINES	SS			-
			75 co 15 co	15 HOV	- extrac
ARTICLE The number	SIV SHARES of stock is: 250 @ \$1.00 P	ER SHARE	Programme of the second	-2 PH	Contraction of the Contraction o
ARTICLE		RECTORS		€0 ∰	(and the second
Name and	ALBERT E SMITH	Name and Title:	<u> </u>	<u> </u>	-
Address:	PRES, VP, SEC, TREAS 809 S ARNOLD AVE	Address:			_
Name and	LANTANA, FL 33462	Name and Title:			_
Address:		Address:			_
Name and	Title:	Name and Title:_	,		_
Address:		Address:			_
ARTICLE The name a Name: Address:	REGISTERED AGENT und Florida street address (P.O. Box NOT acce ALBERT E SMITH 809 S ARNOLD AVE	eptable) of the register	red agent is:		_

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

ALBERT E SMITH

Address:

809 S ARNOLD AVE

LANTANA, FL 33462

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

Date

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