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(Reque	stor's Name)	
(Addres	ss)	
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7.1.1.		
(Addres	6S)	
(City/St	ate/Zip/Phone #))
PICK-UP	WAIT	MAIL
(Dunim	F_#+ *1 \	
(Busine	ess Entity Name)	
(Docun	nent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filir	g Officer:	
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Office Use Only



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(813) 932-5244 (800) 487-2084 13795 N Nebraska Ave Tampa, FL 33613

Fax 813-932-3782 www.activatemylicense.com

June 28, 2016

CREDIT REPORTS

LOCAL RENEWALS

STATE RENEWALS

LOCAL BONDS

PERMITING SERVICE

TECHINCAL ADVICE

CORPORATION

FICTITIOUS NAMES

WORKERS COMP EXEMPTIONS

ASSISTANCE TO OBTAIN CONTRACTORS AND SUB-CONTRACTORS CERTIFICATES

STATE ASSISTANCE FOR CILB & ECLB FOR CERTIFICATION REGISTRATION REINSTATEMENT REGISTRATIONS' ADDITIONAL ENTITY Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Conversion of TIMBRO CONSTRUCTION LLC to TIM BRO CONTRACTOS, INC.

To Whom It May Concern;

Our office is currently in the process of assisting Mr. William Schafle with the conversion process of his current business TIMBRO CONSTRUCTION LLC. His desire is to convert TIMBRO CONSTRUCTION LLC. over to TIM BRO CONTRACTOS, INC.

We have recently submitted a request to amend the business name of TIM BRO CONTRACTORS INC to reflect KURTZ CONTRACTORS, INC. Mr. Schafle would like to release the business name of TIM BRO CONTRACTORS INC in order to accomplish the conversion process from LLC into INC.

If you should have any questions or if you should need any additional information to support this request, please contact our office directly at any time.

Cordially,

Roman Albano Contractors' Reporting Service Inc.

COVER LETTER

TO:	Charter Section Division of C					
SUBJ	ECT: TIM	BRO CONTRACTORS INC	1			
		Name of	Resulting Florida F	rofit (Corporation	
		ate of Conversion, Articles a Profit Corporation" in ac			es are submitted to convert an 5, F.S.	"Other Business
Please	return all corre	spondence concerning this	s matter to:			
ROM	AN_ALBANO					
		Contact Person				
CONT	RACTORS REP	ORTING SERVICE INC.				
		Firm/Company				
13795	N NEBRASKA	AVE				
		Address				
ТАМ	PA, FL 33613					
		City, State and Zip Code	e			
INFO	@ACTIVATEM E-mail address:	YLICENSE.COM (to be used for future annu	ual report notificati	on)		
For fu	rther information	on concerning this matter,	please call:			
ROM	AN ALBANO			932-5		
	Name of	Contact Person	Area Coo	de and	Daytime Telephone Number	
Enclo	sed is a check for	or the following amount:				
= \$10	05.00 Filing Fee	s \$\square\$\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing and Certified Cop		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New I Divisi Clifto	ET ADDRESS Filings Section on of Corporati n Building Executive Center	ons	N L F	lew Fi Divisio P. O. B	ING ADDRESS: illings Section on of Corporations ox 6327 assee, FL 32314	

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 18, 2016

ROMAN ALBANO 13795 N NEBRASKA AVE TAMPA, FL 33613

SUBJECT: TIM BRO CONTRACTORS, INC.

Ref. Number: W16000049365

We have received your document for TIM BRO CONTRACTORS, INC. and your check(s) totaling \$105.00. However, the document has not been filed and is being retained in this office for the following:

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return 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.

Jessica A Fason Regulatory Specialist II

Letter Number: 016A00014892

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:
TIMBRO CONSTRUCTION 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.)
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_12/07/2009
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> :
TIM BRO CONTRACTORS 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; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Page 1 of 2



Signed this 21 day of JUNE	, 20 <u>16</u>
Required Signature for Florida Profit Corpora	ation:
Signature of Chairman, Vice Chairman, Director, Incorporator: Printed Name: WILLIAM SCHAFLE Title: P	Officer, or, if Directors or Officers have not been selected, an
•	iness Entity: [See below for required signature(s).]
Signature: Was	
Printed Name: WILLIAM SCHAFLE	Title: PRESIDENT
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Lia Signature of one General Partner.	bility Partnership:
If Florida Limited Partnership or Limited Lia Signatures of ALL General Partners.	bility Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representa	ative.
All others: Signature of an authorized person.	

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

The name of the corporation shall be:	RACTORS INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address 2054 PARK CRESCENT DR	Mailing address, if different is: 2054 PARK CRESCENT DR
LAND O LAKES, FL 34639	LAND O LAKES, FL 34639
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is	:
ANY AND ALL LAWFUL BUSINESS	
ARTICLE IV SHARES	AND DATE OF THE PARTY OF THE PARTY
The number of shares of stock is: 1000 SHARES TO BE	HELD AT \$1.00 PAR VALUE EACH
ARTICLE V INITIAL OFFICERS AND/OR I	DIRECTORS
Name and Title: WILLIAM SCHAFLE - PRES	Name and Title:
Address: 2054 PARK CRESCENT DR	Address:
LAND O LAKES, FL 34639	
Name and Title:	Name and Title:
Address:	Address:
-	
Name and Title:	Name and Title:
Address:	

•	Required Signature/Incorporator	-	Date	
lu	u du-		06/21/2016	
	his document and affirm that the facts to the Department of State constitutes i			mátion suhmitted in a
	Required Signature/Registered Agent		Date	
las	e del		.06/21/2016	
Having be	**************************************	t service of process fo	i the above stated corporation at n	
	LAND O LAKES, FL 34639	,		
Address:	2054 PARK CRESCENT DR	 -,		
(Name:	WILLIAM SCHAFLE	~~		
The <u>manie</u>	and address of the Incorporator is:			
ARTICL				
	LAND O LAKES, FL 34639			
Addréss:	2054 PARK CRESCENT DR	^ 		
Nanie:	WILLIAM SCHAFLE			
The name	and Florida street address (P.O. Box	NOT acceptable) of th	e registered agent is:	
ARTICLI	EVI REGISTERED AGENT	NOT accentable) of th	e registered agent is:	