P17000056170

(Requ	estor's Name)	
(Addr	ess)	
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(City/s	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Na	me)
(Docu	ıment Number)
Certified Copies	Certificate	es of Status
Special Instructions to Fil	ling Officer:	
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MOffice Use Only

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T. SCOTT



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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 9, 2017

JON MOISE 606 SE 26TH TER CAPE CORAL, FL 33904

SUBJECT: MOISE CONSTRUCTION & REMODELING, INC.

Ref. Number: W17000014138

We have received your document for MOISE CONSTRUCTION & REMODELING, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 117A00003193

COVER LETTER

TO: Charter Section Division of Corporations	•	·	
SUBJECT: moise construction & remodeling	ig , /NC		
Na Na	me of Resulting Florid	da Profit Corporation	
The enclosed Certificate of Conversion, A Entity" into a "Florida Profit Corporation	Articles of Incorporatio " in accordance with s.	on, and fees are submitted to convert an "Other Busis. 607.1115, F.S.	ness
Please return all correspondence concerni	ng this matter to:		
jon moise			
Contact Perso	on		
moise construction & remodeling. LLC / /	AC,		
Firm/Compar	ıy		
606 se 26th ter			
Address		-	
cape coral, florida 33904			
City, State and Zi	p Code		
jmoise79@gmail.com			
E-mail address: (to be used for future	e annual report notific	cation)	
For further information concerning this m	atter, please call:		
jon moise	at (450-2691	
Name of Contact Person	Area (Code and Daytime Telephone Number	
Enclosed is a check for the following amount	ount:		
□ \$105.00 Filing Fees □\$113.75 Filing and Certificate o Status			
STREET ADDRESS: New Filings Section Division of Corporations		MAILING ADDRESS: New Filings Section Division of Corporations	

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

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

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:
moise construction & remodeling, LLC — LD9 W \ \ S \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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
(Enter state, or if a non-U.S. entity, the name of the country)
december 4, 2009 on
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.
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
moise constrion & remodeling MOISE CONCTRUCTION E REMODELING, 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

APPROVED AND FILED FILED FILED

Signed this 3/ day of TANUAR	<u>y</u> , 20 <u></u>
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman Prector, Office Incorporator: X Printed Name: John Mois Title: Pr	er, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business E	
Signature: XAM 8	
Printed Name: TON MOISE	Title: <u>SOLE OWNER</u>
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
If Florida General Partnership or Limited Liability Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability I Signatures of ALL General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	Done
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 II PRINCIPAL OFFIC		,		
The principal place of business/mailing add	dress is:			
Principal street address 606 se 26th ter	Mailing address, if d	lifferent is:		
cape coral, fl 33904				
ARTICLE III PURPOSE The purpose for which the corporation is	organized is:			
,	_			
	AL BUSINESS AUTHORIZED			
STATE OF FLOR	RIDA			
				
		-		
ARTICLE IV SHARES The number of shares of stock is:				
The number of shares of stock is:	16,000			
The number of shares of stock is:	AND/OR DIRECTORS			
The number of shares of stock is: ARTICLE V INITIAL OFFICERS Name and Title: JON MOISE	AND/OR DIRECTORS PRes PVST Name and Title:			
The number of shares of stock is: ARTICLE V INITIAL OFFICERS Name and Title: JON MOISE,	AND/OR DIRECTORS			
The number of shares of stock is: ARTICLE V INITIAL OFFICERS Name and Title: JOY MOISE	AND/OR DIRECTORS PRes PVST Name and Title: TERR Address:	·		
The number of shares of stock is: ARTICLE V INITIAL OFFICERS Name and Title: JON MOISE, Address: 606 SE 26 To See CORAL FO	AND/OR DIRECTORS PRes PVST Name and Title: TERR Address:			
The number of shares of stock is: ARTICLE V INITIAL OFFICERS Name and Title: JON MOISE, Address: 606 SE 26 D C APE CORAL FO Name and Title:	AND/OR DIRECTORS PRes PVST Name and Title: TERR Address: 33904 Name and Title:	7		
The number of shares of stock is: ARTICLE V INITIAL OFFICERS Name and Title: JON MOISE Address: 606 SE 26	AND/OR DIRECTORS PRes PVST Name and Title: 7ERR Address: 33904 Name and Title:		Z8 AM	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS Name and Title: TON MOISE, Address: 606 SE 26 D C APE CORAL FO Name and Title:	AND/OR DIRECTORS PRes PVST Name and Title: TERR Address: 33904 Name and Title:		Z8 AM	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS Name and Title: JON MOISE, Address: 606 SE 26 D C APE CORAL FO Name and Title:	AND/OR DIRECTORS PRes PVST Name and Title: 7ERR Address: 33904 Name and Title: Address:	STE FLORE		

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: JON MOISE
Address: 606 SF 26 th TERN
CAPE CORAL FZ 33904
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
Name: Jon Molso
Address: 604 SE 26 th TERR CAPE CONAL FR 33904
CAPE CORAL FR 33904
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 Date
I submit this document and affirm that the facts stated berein 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.
x m 8 M/ 1/31/19
Required Signature Ancorporator Date