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COVER LETTER

| TO: | Charter Section Division of Co | | | | | |
|--|---------------------------------------|---|---|---------------------------------|---|----------|
| SUB. | JECT: Angela Rigg | gs, P.A. | | | | |
| | | Name of | Resultin | g Florida Profi | t Corporation | |
| | | e of Conversion, Article Profit Corporation" in ac | | | fees are submitted to convert an "Other 115, F.S. | Business |
| Please | e return all corresp | pondence concerning thi | s matter t | to: | | |
| Angel | a Riggs | | | | | |
| | | Contact Person | | | | |
| Riggs | & Associates Real | Estate, LLC | | | | |
| | | Firm/Company | | | | |
| 293 H | lidden Bay Dr. Unit | # 102 | | | | |
| | | Address | | | | |
| Ospre | y, FL | | | | | |
| | · · · · · · · · · · · · · · · · · · · | City, State and Zip Cod | e | | | |
| 34229 |) | | | | | |
| | E-mail address: (t | o be used for future annu | ual repor | t notification) | | |
| For fu | ırther information | concerning this matter. | please ca | ill: | | |
| Angel | a Riggs | | 941 | 735- | 6200 nd Daytime Telephone Number | |
| | Name of Co | ontact Person | —··· · | Area Code ar | nd Daytime Telephone Number | |
| Enclo | sed is a check for | the following amount: | | | | |
| ■ \$10 | 05.00 Filing Fees | ☐\$113.75 Filing Fees and Certificate of Status | | .75 Filing Fees rtified Copy | S IS122.50 Filing Fees, Certified Copy, and Certificate of Status | |
| STREET ADDRESS: New Filings Section Division of Corporations | | New | LING ADDRESS: Filings Section ion of Corporations | | | |
| Clifto | n Building Executive Center | | | P. O. | Box 6327 hassee, FL 32314 | |

Tallahassee, FL 32301

Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation 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 Con | version | is: | |
|---|----------------|----------|--------|
| Riggs & Associates Real Estate, LLC | | | |
| Enter Name of Other Business Entity | • | | |
| 2. The "Other Business Entity" is a Limited Liability Company | 3 - - ; | 17 | |
| general partnership, common law or business trust, etc.) | | JUL 24 | FILED |
| first organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country) | | 22. | ন ভ |
| July 14, 2017 | | S S | |
| Enter date "Other Business Entity" was first organized, formed or incorporated | | ပြု | |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws organized, formed or incorporated: n/a The state of the Florida D. G. G. Country and first in the state of country under the laws organized. | | | |
| The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> Agela Riggs, P.A. | <u>ı:</u> | | |
| | | | |
| 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 Department of State; AND 2) must be the same as the effective date listed in the attached Articlif an effective date is listed therein.) | | | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this listed as the document's effective date on the Department of State's records. | s date w | 'ill not | be |

| 19 July | - 17 |
|---|--|
| Signed thisday of | |
| Required Signature for Florida Profit Corporation: | |
| | eer, or, if Directors or Officers have not been selected, an |
| Incorporator: Printed Name: Angela Riggs Title: President | nt |
| Required Signature(s) on behalf of Other Business | |
| Signature: Sugal Rigor | |
| Printed Name: Angel Riggs | Title: AMBR |
| Signature: Lila Lila | |
| Printed Name: Ricky Riggs Printed Name: Ricky Riggs | Title: AMBR |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | ···· |
| Printed Name: | |
| Signature: | |
| Printed Name: | Title: |
| If Florida General Partnership or Limited Liability Signature of one General Partner. | Partnership: |
| If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners. | Limited Partnership: |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representative. | |
| All others: Signature of an authorized person. | |
| Fees: | 225.00 |
| Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: | \$35.00 \$70.00 \$8.75 (Optional) |
| Certificate of Status: | S8.75 (Optional) |

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

| The name of the corporation shall be: Angela Riggs, P.A | |
|---|------------------------------------|
| ARTICLE II PRINCIPAL OFFICE | |
| The principal place of business/mailing address is: | |
| Principal street address | Mailing address, if different is: |
| 293 Hidden Bay Dr. | ivialing address, it different is. |
| Unit # 102 | |
| Osprey, FL 34229 | |
| ARTICLE III PURPOSE | |
| The purpose for which the corporation is organized is | X. |
| REAL ESTATE SERVICES | |
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| | |
| ARTICLE IV SHARES 1500 | |
| The number of shares of stock is: | |
| ARTICLE V INITIAL OFFICERS AND/OR I | DIDEC'TO DS |
| | DIRECTORS |
| Name and Title: Angela Riggs - President | Name and Title: |
| Address: 293 Hidden Bay Drive Unit # 102 | A. J.J. |
| | Address: |
| Osprey, FL 34229 | |
| Name and Title: | Name and Title: |
| | |
| Address: | Address: |
| | |
| Name and Title: | |
| | |
| Address: | Address: |
| | |
| | |

| 3 Hidden Bay Drive Unit #102 sprey, FL 34229 II INCORPORATOR | | 17 JUL 71 |
|--|--|--|
| II INCORPORATOR | | |
| | | , |
| 1 11 PA 1 | | 22 |
| 1 address of the Incorporator is: | | |
| ngela Riggs | | AM IO: |
| 3 Hidden Bay Dr. Unit # 102 | | 55 6 |
| sprey, FL 34229 | | |
| | | |
| equired Signature Registered Agent | Date | |
| | | |
| 1 () | 7/19/2017 | |
| | sprey, FL 34229 named as registered agent to accept service of process, I am familiar with and accept the appointment of a signature Registered Agent document and affirm that the facts stated herein | named as registered agent to accept service of process for the above stated corporation, I am familiar with and accept the appointment as registered agent and agree to act in the service of process. |