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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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FILED 17 OCT -2 PM 2: 13

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COVER LETTER

TO: Charter Section Division of Corporations	
SUBJECT: Morrisons Custom Cabinetry & More LLA 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:	
Steven Morrison Contact Person	
Morrisons Cistom Cabinatry & More LLC Firm/Company	
3065 Cherokee Road Address	
ST cloud, FL 34772 City. State and Zip Code	
Lemail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Steven Morrison at (407) 902-5025 Name of Contact Person Area Code and Daytime Telephone Number	
Enclosed is a check for the following amount:	
S105.00 Filing Fees and Certificate of Status □S113.75 Filing Fees and Certified Copy Status □S122.50 Filing Fees. Certified Copy, and Certificate of Status	
STREET ADDRESS:MAILING ADDRESS:New Filings SectionNew Filings SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 63272661 Executive Center CircleTallahassee, FL 32314	

Tallahassee, FL 32301



August 29, 2017

STEVEN MORRISON 3065 CJEROKEE ROAD ST CLOUD, FL 34772

SUBJECT: MORRISONS CUSTOM CABINETRY & MORE INC

Ref. Number: W17000070827

We have received your document for MORRISONS CUSTOM CABINETRY & MORE INC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Tim Burch Regulatory Specialist III

www.sunbiz.org

Letter Number: 617A00017779

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 Conversion is:

Morrisons Custom Cabinety & More LLC	
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a LLC LIM-95157 (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.) tirst organized, formed or incorporated under the laws of(s-13-2014 Florida	<u> </u>
tirst organized, formed or incorporated under the laws of <u>Cs-13-2614 Florida</u> (Enter state, or if a non-U.S. entity, the name of the country)	Ti D
on (e-13.2014	
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 organized, formed or incorporated: 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> 	now
Morrisons Custom Cabinetry & More Inc Enter Name of Florida Profit Corporation	
5. If not effective on the date of filing, enter the effective date: 8-24-2017. (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Flo Department of State.)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not listed as the document's effective date on the Department of State's records.	be

Signed this 24 day of AUQUST	. 20_1
Required Signature for Florida Profit Corporation	<u>ı:</u>
Signature of Chairman, Vice Chairman, Director, Off Incorporator: Printed Name Steven Morcism Title: Yee	icer, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business	
Signature:	
Printed Name: Steven Morrison	n Title: President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liabilit Signature of one General Partner. If Florida Limited Partnership or Limited Liabilit	
Signatures of ALL General Partners. 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)

The name of the corporation shall be: Morrison	s Cabinetry + More Inc
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	·
Principal street address 3065 Cherokee Road	Mailing address, if different is:
5T cloud F2 34772	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Any Lawful	
ARTICLE IV SHARES The number of shares of stock is: 100	
	idnt
Name and Title Steven Morrison	
Address: 304.5 Cherokee Road ST Cloud, FL 34772	Address:
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

	(EGISTERED AGENT				
The <u>name and Flo</u>	rida street address (P.O. Box NOT	Tacceptable) of the regis	stered agent is:		
Name: Ster	on Morrison				
Address: 306	5 Cherokee Pd.				
ST	Sund, FL 34772	2			
ARTICLE VII The name and add	INCORPORATOR Iress of the Incorporator is:				
Name: 16 H	4 Mondshow				
Address: 21	10 14th Street				
ST	cloud, FL 34769				
			/ * · · · · · · · · · · · · · · · · · ·	- - -	<u>.</u>
Havino been name	ed as registered agent to accept ser	vice of process for the a	******* hove stated cornoration a	it the place design	Z ated in
	n familiar with and accept the appo				ייי יייידי ככ
4	<i>"</i> /		-1-1-	5.2. - 13.	_
1	ed Signature/Registered Agent		8/25/17	्रिल 🐱	
Kequir /	ga Signature/Registerea Agent		7 Date		
	ment and affirm that the facts state				ed in a
document to the P	epartment of State constitutes a thi	ird degree felony as prov	ided for in s.817.155, F.S	Ť.	
////N	ncShow		8/25/2017		
Require	ed Signature/Incorporator		Date		