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(Re	questor's Name)	
(Ad	dress)	
(Ad-	dress)	
(Cit	y/State/Zip/Phone	ə #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Recl-	Jay Cabir	nets	
	Name of	ィビオら Resulting Florida Profit (Corporation
		s of Incorporation, and fe cordance with s. 607.111	es are submitted to convert an "Other Business 5, F.S.
Please return all correspondent	ondence concerning this	s matter to:	
Bonnie D	e A +1ey Contact Person		
Red-Joy	Cabinets Firm/Company		
6522 <u>50</u>	N Casa D Address	RIVE	
Englewood	S FL 343 City, State and Zip Code	:	
Donne (ed.) E-mail address: (to	be used for future anni	al report notification)	7)
For further information of	concerning this matter, p	olease call:	
Bonnie De Name of Co	Atley ntact Person	at (<u>OUI</u>) Ur Area Code and	14 - 896を Daytime Telephone Number
Enclosed is a check for t	he following amount:		
	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing Fees and Certified Copy	S122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		New Fi Divisio P. O. B	ING ADDRESS: lings Section n of Corporations ox 6327 ssee, FL 32314

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:
Red-Jay Cabinets Enter Name of Other Business Entity
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
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 AUGUST 14, 2015 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> : Red - Jay Cahnets, Corporation Enter Name of Florida Profit Corporation
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.) 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

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ECNULTANT OF CASTR

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Signed this 6 day of MARCH, 20 18				
Required Signature for Florida Profit Corporation:				
Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, a Incorporator: Printed Name: CHRISTOP OF WALLOCE Title: PROSIDENT				
Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s),]				
Signature: PMU				
Printed Name: Christopher J. WALLACE Title: PRESIDENT				
Signature: Karole W. Wirllens				
Printed Name: Randy H. WALLACE Title: VICE PRESIDENT				
Signature: Bonnie L. De Atley				
Signature: Bonnie Z. De Atley Printed Name: BONNIE L. DE Atley Title: CFO				
Signature:				
Printed Name: Title:				
Signature:				
Printed Name: Title:				
Signature:				
Printed Name: Title:				
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.				
If Florida Limited Partnership or Limited Liability Limited Partnership: 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: \$35.00 Fees for Florida Articles of Incorporation: \$70.00 Certified Copy: \$8.75 (Optional) Certificate of Status: \$8.75 (Optional)				

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Page 2 of 2

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

The name of the corporation shall be: Red - Jay Cabinets, CORP	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address Mailing address, if differ	ent is:
6522 San Casa DR	
Englewood FL 34224	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: 1771914 + C. C+URING OF Cabinets	
	
	18 ALC
	MAR LAHA
ARTICLE IV SHARES The number of shares of stock is: SHARE	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS), FLO
Name and Title: CHRISTOPHER, WALKACE, PRES Name and Title:	21 - 21 - 21 - 21 - 21 - 21 - 21 - 21 -
Address: 3588 MASSINI AUE Address:	
NORTH PORT FL 34286	
Name and Title: BANDY H. WALACE, VP Name and Title:	
Address: 3587 MASSINI AUC Address:	
MORTH PORT FL 34284	
Name and Title: BONNIE DEATIEY, CFO Name and Title: Address: 6329 Rosewood DR Address:	
Englewood FL 34224	

Ø

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:

LORI WELLBAUM EMERY

Address:

686 N. Indiana Ave

Englewood FL 34223

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

CHRISTOPHER WALLACE

Address:

6522 SAN CASA DRIVE

ENglewood, FL 34224

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

3-8-19

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