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(Requestor's Name)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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02/21/18--01016--026 \*\*105.00

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18 MAR 30 AM 11:45  
TALLAHASSEE, FL 32301



D O'KEEFE

APR 04 2018

W18-18672

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 26, 2018

REINA MARDIS  
857 COURTINGTON LANE APT B  
FORT MYERS, FL 33919

SUBJECT: INTERIOR DESIGN BY SUNRISE REMODELING, INC.  
Ref. Number: W18000018672

SECRETARY  
TALLAHASSEE, FL 32399

19 MAR 30 AM 11:45

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We have received your document for INTERIOR DESIGN BY SUNRISE REMODELING, 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):

Please provide required signatures for names listed in the Articles of Conversion.

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. ✓

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize. ✓

The registered agent must sign accepting the designation. ✓

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 018A00003870

## COVER LETTER

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** Interior Design By Sunrise Remodeling, LLC

\_\_\_\_\_  
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:

Reina Mardis

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Firm/Company

357 Courtington Lane Apt B

\_\_\_\_\_  
Address

Fort Myers, FL 33919

\_\_\_\_\_  
City, State and Zip Code

bkiynreins@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Reina Mardis

at ( 239 ) 265-6222

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$105.00 Filing Fees	<input type="checkbox"/> \$115.75 Filing Fees	<input type="checkbox"/> \$113.75 Filing Fees	<input type="checkbox"/> \$122.50 Filing Fees.
	and Certificate of	and Certified Copy	Certified Copy, and
	Status		Certificate of Status

**STREET ADDRESS:**

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

**MAILING ADDRESS:**

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 **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:

Interior Design By Sunrise Remodeling, LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a \_\_\_\_\_  
(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 2/19/18 12/29/2017  
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:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

Interior Design By Sunrise Remodeling, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 2/19/18

(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.

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TALLAHASSEE, FLORIDA

Signed this 19 day of February, 2018.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an

Incorporator: Chad Mardis

Printed Name: Chad Mardis Title: Owner

**Required Signature(s) on behalf of Other Business Entity:** [See below for required signature(s).]

Signature: Chad E Mardis

Printed Name: Chad Mardis Title: President

Signature: Reina Mardis

Printed Name: Reina Mardis Title: Vice President

Signature: Reina Mardis

Printed Name: Reina Mardis Title: Secretary

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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TALLAHASSEE, FL 32309

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

**ARTICLE I NAME** Interior Design By Sunrise Remodeling, Inc.  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is: \_\_\_\_\_

857 Courtington Lane, Apt B

Ft Myers, FL 33919

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES**

100

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Chad Mardis, President

Name and Title: \_\_\_\_\_

Address 857 Courtington Lane, Apt B  
Ft Myers, FL 33919

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Reina Mardis, Vice President

Name and Title: \_\_\_\_\_

Address 857 Courtington Lane, Apt B  
Ft Myers, FL 33919

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Reina Mardis, Secretary

Name and Title: \_\_\_\_\_

Address 857 Courtington Lane, Apt B  
Ft Myers, FL 33919

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Chad Mardis  
Address: 857 Courtington Lane, Apt B  
Fort Myers, FL 33919

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Chad Mardis  
Address: 857 Courtington Lane, Apt B  
Fort Myers, FL 33919

\*\*\*\*\*

*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*

Chad Mardis  
Required Signature/Registered Agent

2/19/18  
Date

*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.*

Chad Mardis  
Required Signature/Incorporator

2/19/18  
Date

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