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(Re	equestor's Name)	-
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PICK-UP	☐ WAIT	MAIL
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(Document Number)		
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Charter Section Division of Corporatio	ns					
SUBJECT: Alpha	Mainten	Ance, LLC Resulting Florida Prof				
1	Name of F	Resulting Florida Prof	t Corporation			
The enclosed Certificate of Cor Entity" into a "Florida Profit C				an "Othe	er Busi	ness
Please return all correspondence	ce concerning this	matter to:				
Johnny N	Miller Intact Person					
Alpha Maix	nten an (ce, LLC		SECKELY ALL SHE	18 APR I	
8902 Spring	Hawest	Ln. W			8 PH 7:	
Jacksonville, [City. St	テレ 326 tate and Zip Code	244		·	21	
handymanalph E-mail address: (10 be uso	14 @ gmo ed for future annu	al report notification)				
For further information concern	ning this matter, p	olease call:				
Johnny Miller Name of Contact P			3807 nd Daytime Telephone Number	er		
Enclosed is a check for the foll	owing amount:					
□ \$105.00 Filing Fees □\$113 and Ce Status	ertificate of	□\$113.75 Filing Fee and Certified Copy	S \$122.50 Filing Fees, Certified Copy, and Certificate of Status			
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building		New Divis	LING ADDRESS: Filings Section sion of Corporations Box 6327			

Tallahassee, FL 32314

2661 Executive Center Circle

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 Conversion is:
Alpha Maintenance, LLC //0000546047 Enter Name of Other Business Entity
2. The "Other Business Entity" is a <u>Limited Liability Company</u> (Enter entity type. Example: limited liability company, limited partnership, grown 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 84 29 2010 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 now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> : Alpha Maintenance, INC. 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.

Signed this 21 m day of March	, 20 1 8		
Required Signature for Florida Profit Corporation:			
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Printed Name: Johnny Mille Title: OW	r, or, if Directors or Officers have not been	selected, an	
Required Signature(s) on behalf of Other Business E		l	
Signature: 1. E - Mills			
Signature: J.EMiller Printed Name: Johnny Miller	Title: Owner		
Signature:			
Printed Name:	_ Tide:		
Signature:			
Printed Name:	Title:		
Signature: Printed Name: Signature:		18 APR	7
Printed Name:		20 20 20 20 20 20 20 20 20 20 20 20 20 2	
Signature:		32	Γ
Printed Name:	_ Title:	7.2	ŗ
Signature:		, ~	
Printed Name:	Title:		
If Fiorida General Partnership or Limited Liability Signature of one General Partner.	Partnership:		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:		
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)		

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: Alpha Mo	aintenance, INC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		
Principal street address 8902 Spring Harvest Ln.W	Mailing address, if different is:	
Jacksonville, FL 32244		
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
	—————————————————————————————————————	
	APR	
		M
	7: 22	******
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND/OR DIRE	CTORS	
Name and Title: Peks 1967	Name and Title:	
Address: 8902 Spring Harvest Ln. W	Address:	
Jacksonville, FL 32244		
Name and Title: Johnny Miller	Name and Title:	
Address:	Address:	
Name and Title:	Name and Title:	
Address:	Address:	

ARTICLE	VI REGISTERED AGENT	
The <u>name a</u>	nd Florida street address (P.O. Box NOT acceptable) of the	registered agent is:
Name:	Johnny Miller	
	8902 Spring Harrest Ln.W	
	Jacksonville, FL 32244	Ect 6
ARTICLE		PR T
	nd address of the Incorporator is:	
Name:	Johnny Miller	
Address:	8902 Spring Harvest Ln. W	ب ب
	Jacksonville, FL 32244	~ ~
*******	*************	****
Having bee	n named as registered agent to accept service of process for ate, I am familiar with and accept the appointment as registe	the above stated corporation at the place designate red agent and agree to act in this capacity
this certifica	A	Azulie
this certifica	G N/1:11	
this certifice	Required Signature/Registered Agent	3/24/18 Date
	Required Signature/Registered Agent	Date
I submit the	Required Signature/Registered Agent is document and affirm that the facts stated herein are true. to the Department of State constitutes a third degree felony as	Date I am aware that any false information submitted
I submit the	s document and affirm that the facts stated herein are true.	Date I am aware that any false information submitted