P18000038250

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

Office Use Only



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COVER LETTER

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TO:	Charter Section Division of Co					
CHRI	PILLAR HO	OME INVESTMENTS, IN	C.			
SOD	ilor.	Name of	Resulting	Florida Profit	Corporation	
		e of Conversion. Article Profit Corporation" in ac			ees are submitted to convert an "15. F.S.	Other Business
Please	e return all corres _i	pondence concerning thi	s matter to) :		
John 7	Alonge					
		Contact Person				
PILLA	AR HOME INVES	TMENTS, INC.				
		Firm/Company				
4842	Yacht Basin Drive					
		Address				
Jackso	onville, FL 32225					
		City, State and Zip Cod	e			
	pillarhomeinvestm					
	E-mail address: (t	o be used for future annu	ual report	notification)		
For fu	irther information	concerning this matter,	please cal	I :		
John 2	Alonge		904 at (612-26	076	
	Name of Co	ontact Person		Area Code and	Daytime Telephone Number	
Enclo	sed is a check for	the following amount:				
3 \$10	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status		75 Filing Fees ified Copy	☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New I Divisi Clifto	EET ADDRESS: Filings Section ion of Corporation in Building Executive Center			New F Divisio P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, 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 Cor	version	is:	
PILLAR HOME INVESTMENTS, INC. 714-47			
Enter Name of Other Business Entity	-·		
2. The "Other Business Entity" is a Foreign Profit Corporation			
(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 Nevada (Enter state, or if a non-U.S. entity, the name of the country)			
10/3/2014			
Enter date "Other Business Entity" was first organized, formed or incorporated	l		
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws organized, formed or incorporated:	of whic	:h it is	now
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> PILLAR HOME INVESTMENTS, INC.	<u>1:</u>		
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 f Department of State.) 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.			
Page 1 of 2	100 mm	18 APR 30	Page of the second seco

Signed this 9th day of April	. 20 18	
Required Signature for Florida Profit Corporation		
Signature of Chairman Vice Chairman Director. Off Incorporator. Printed Name: Ton A long e Ting 1	or, if Directors or Officers have not	been selected, an
Required Signature(s) on behalf of Other Business	Entity: [See below for required signatu	re(s).]
Signature: Jelany		
Printed Name: John Alonge	Title: President	
Signmen al Celovar		
Printed Name: John Along	_ Title: Secte GAray	_
Signature: Total Colorer	\bigcirc	
Printed Name: Vohn Alang	Title: Treasurer	<u>-</u>
Signature Julians		
Printed Name: John Alonge	Title: Director	<u></u>
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Tîtle:	 .
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	v Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		180
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)	FILED APR 30 AH 9: 0

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: PILLAR HOME INV	ESTMENTS, INC.	·· ·
ARTICLE II PRINCIPAL OFFICE	.45	
The principal place of business/mailing address is:		
Principal street address 4842 Yacht Basin Drive	Mailing address, if different is	•
Jacksonville, FL 32225	· · · · · · · · · · · · · · · · · · ·	
ARTICLE III PURPOSE		
The purpose for which the corporation is organized is:		
The corporation shall have unlimited power to engage in and	do any lawful act concerning any or all lawful business	for which
corporations may be organized under the law and limited by t	he statutes of Florida, or any other state in which it cor	nducts
business.		
		# - (1)
		,.
		<u> </u>
The number of shares of stock is: 1.000 (one thousand)		
ARTICLE V INITIAL OFFICERS AND/OR DIR	RECTORS	
Name and Title: John Alonge - President	Name and Title: John Alonge - Secretary	
Address: 4842 Yacht Basin Drive	Address: 4842 Yacht Basin Drive	_
Jacksonville, FL 32225	Jacksonville, Ft. 32225	
Name and Title: John Alonge - Treasurer	Name and Title: John Alonge - Director	
Address: 4842 Yacht Basin Drive	Address: 4842 Yacht Basin Drive	-
Jacksonville, FL 32225	Jacksonville, Ft. 32225	
Name and Title:	Name and Title:	
Address:	4 d.d	
	Address:	

ARTICL	E VI REGISTERED AGENT	•
The name	e and Florida street address (P.O. Box NOT acc	ptable) of the registered agent is:
Name:	John Alonge	
Address:	4842 Yacht Basin Drive	••
	Jacksonville, FL 32225	
ARTICL	E VII INCORPORATOR	
The name	and address of the Incorporator is:	
Name:	John Alonge	
Address:	4842 Yacht Basin Drive	
	Jacksonville, FL 32225	
******	**********	*****
Having be this certifi	een named as registered agent to accept service of icate, I am familiar with and accept the appointm	process for the above stated corporation at the place designated into the above stated agent and present and agree to act in this capacity
	19 Sebrow	4/9/2018
	Required Signature/Registered Agent	Date
I submit ti	his do <u>cument and affirm that</u> the facts stated her	rin are true. I am aware that any false information submitted in
docu nent	to the Department of Stare constitutes a third deg	ree felony as provided for in s.817.155, F.S.
	teloren	4/9/2018
	Required Signature/Incorporator	Date
	/	

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