# 71800088300

(Re	equestor's Name)			
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Do	ocument Number	)		
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
	·· <del>-</del>			

Office Use Only



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### **COVER LETTER**

TO: Charter Section Division of Corporations
SUBJECT: Gulf Beach Builders Inc.  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:
James SCott Contact Person
Gulf Beach Builders Firm/Company
440 Herron Villa Pl. Address
Pensacola, Fl. 3,506 City, State and Zip Code
JE-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$105.00 Filing Fees and Certificate of Status  ☐ \$113.75 Filing Fees and Certified Copy Certified Copy, and 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.

3

Signed th	is 2157 day of Septe	m 62/ 20 / 8		
Required	l Signature for Florida Profit Corporation:			
Signature Incorpora Printed N	of Chairman, Vice Chairman, Director, Officerator: James W. Scattame: Karnes W. Scattame: Lo	r, or, if Directors or Officers have not been	i selected, an	
Reanire	d Signature(s) on behalf of Other Business Er	<u>ntity:</u> [See below for required signature(s	).]	
Signature	James W los	CEO	1	
Printed N	Name: Jaines W Scitt	Title: Key 1 tesen	BENT	
Signature	onde Satt	CFO		
Printed S	Name: AMDER Scett-	Title: #21 How Tolk All	embe	
Signatur	e:			
Printed A	Name:	Title:	-	
Signatur	e:			
Printed 2	Name:	_ Title:		
Signatur	e:		-	
Printed 1	Name:	_ Title:	-	
Signatur	e:		_	
Printed 1	Name:	Title:	-	
Signatur	da General Partnership or Limited Liability re of one General Partner.			
Signatur	da Limited Partnership or Limited Liability res of <u>ALL</u> General Partners.	Diffice 1 at the 15mp.		
	da Limited Liability Company: re of a Member or Authorized Representative.		18 747	
All other	ers: re of an authorized person.		18 007 24 75 for a sai	<u> </u>
	Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	AN 10: 24	ED

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

The name of the corporation shall be:	If Beach Builders, Inc
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
440 Herron Villa Bl	
Pensacola, Pl. 3250	
ARTICLE III PURPOSE  The purpose for which the corporation is organized	is:
Real estate in	Vestnent 5.
	0C 24
	M 0: 2
ARTICLE IV SHARES The number of shares of stock is:/ \( \)	
ARTICLE V INITIAL OFFICERS AND/OR	
Name and Title: <u>James W. S</u> O	at T Name and Title: Ray Staron Agons
Address: 440 Herron Vill	
Pensacola, El	33506
Name and Title: Anber 0 5 Cot	
	Address: CFO
Address: 440 Herron Villa	<u> </u>
Pensacula, Fl. 33	<u> </u>
<u> </u>	<u> </u>

Name:	James W. Scott	
Address:	440 Harron Villa 11.	
	140 Harron Villa II. Pensacola, Fl. 35500	
ARTICL	E VII INCORPORATOR	
The <u>name</u>	and address of the Incorporator is:	
	James W. Scott	
Address:	440 Horran Villa Pl.	
	140 Herran Villa Pl. Pensacila, Fl. 33506	
******	************	*****
Having be this certifi	een named as registered agent to accept service of process for icate, I am familiar with and accept the appointment as registe	the above stated corporation at the place designated in red agent and agree to act in this capacity
	2 10	a / 1/10
	Prequired Signature/Registered Agent	9/31/18 Date
/	his 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.
	Auma is los	9/31/18 Date
	Required Signature/Incorporator	Date
	,	18 0 0
		4 <u>9 T</u>
		18 0CT 24 AV
		AHIO: 2
		24 (A)
		No. of the second

ARTICLE VI REGISTERED AGENT

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