## P19000008480

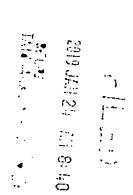
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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## COVER LETTER

TO:	Charter Section Division of Co					
		•	ating and	l Air	Inc	
SUBJE	ECT:		Resulting Floric		······································	
<b>Th.</b>	alamad Camidina		_		·	. non b
		Profit Corporation" in a	•		ees are submitted to convert a 15, F.S.	n "Other Business
Please	return all corres	pondence concerning the	is matter to:			
		David Edens				
		Contact Person				
	Eden	s Heating and	l Air			
~		Firm/Company		_		
503	32 Capito	ol Circle SW St	e2 #129			
-	<u>. '</u>	Address	- · · · · · · · · · · · · · · · · · · ·	<del></del>		
	Tallaha	ssee Florida 3	2305			
		City, State and Zip Cod	e	-		
	_	DavidEdens.ne				
E-	mail address: (t	to be used for future annu	ual report notific	ation)		
For furt	her information	concerning this matter.	please call:			
	David	Edens	at ( 850	, 3	39-8559	
	Name of Co	ontact Person	Area C	ode and	Daytime Telephone Number	
Enclose	d is a check for	the following amount:				
<b>□ \$10</b> 5	.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filir and Certified C	_		
New Fil Divisior Clifton I 2661 Ex	T ADDRESS: ings Section of Corporation Building ecutive Center (see, FL 32301			New F Division P. O. B	ING ADDRESS: illings Section on of Corporations fox 6327 assee, 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:
Edens Heating and air LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a Limited Liability Company
(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)
(Enter state, or if a non-U.S. entity, the name of the country)
on 11/12/2003
Enter date "Other Business Entity" was first organized, formed or incorporated
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:
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now
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:
<ol> <li>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:</li> <li>The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:</li> </ol>

Signed	this	18	_day of	January		. 20	19	
<u>Reguir</u>	ed Signa	iture fa	r Florida Pro	fit Corporation:				
Incorpo		00	. <i>V</i> 73	o, Director, Office Aewo Title: Presi	_		icers have n	ot been selected, an
	_	A	-1) (5	Other Business E	<u>Intity:</u> [S	lee below for re	equired signs	ature(s).]
-	ire: <u> </u>		vid Edens		Title:	Membe	r LLC	
	ire:	1	long de				· · · · · · · · · · · · · · · · · · ·	<del></del>
Printed	Name:_	Ya	mes Edens	5	_ Title: _	Memb	er LLC	
Signatu	ire:	fr	n lec					
Printed	Name:_	<i>V</i>		<del> </del>	_ Title: _			
Signatu	ire:	<u> Yai</u>	uil Ed	eno		<del></del>		
Printed	Name:_	Davi	id Edens		Title: _	Preside	<u>nt</u>	(new entity)
Signatu	ire:	Jan	un br					
Printed	.Name:_	Jame	es Edens		Title: _	Vice pres	ident	
Signatu	ıre:							
Printed	Name:_				Title: _			
			rtnership or I al Partner.	imited Liability	<u>Partners</u>	hip:		
			rtnership or L neral Partners.	imited Liability	Limited )	Partnership:		
			bility Compa or Authorized	n <u>y:</u> Representative,				
All oth Signatu		authori	zed person.					
Fees:		r Florid d Copy		corporation:		Optional)		

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

ARTICLE I	NAME	<b></b>	1 1 ! A 1	)
The name of the	corporation shall be:	edens	Heating and Air	# NC .
ARTICLE II	PRINCIPAL OFFICE			
	ace of business/mailing address is	s:	·	
	Principal street address		λ	Aailing address, if different is:
5032 Ca	pitol Circle SW Ste2 #129		*********	
Tallah	nassee Florida 32305	<del></del>	<del> </del>	
ARTICLE III The purpose for	PURPOSE which the corporation is organi	ized is:		
The purpose	of the corporation is to en	igage in a	ny lawful activity	for which corporations may be
incorporated	I in this state			
		, <del>_</del>	ianda amik anta anta anta anta de anta anta anta anta anta anta anta ant	
ARTICLE IV	SHARES	10.00	00 Ordinady Shar	rac
The number of s	SHARES hares of stock is:			C5
ARTICLE V	INITIAL OFFICERS AND	OR DIRE	CTORS	
	David Edens President		Name and Title:_	James Edens Vice president
idress:	2540 Shadowwood Dri	ve	Address:	5800 Jodphur Court
•••	Tallahassee Florida 3230	05	Se true	Tallahassee Florida 32303
ne and Title:			Name and Title:_	
			Address:	
ress:				
-				
and Title:			Name and Little:	
is:			Address:	وسا الدوارية والشافالة التقاد الدينة ساريناسة ويدو المتوادية اليوادية بدولت موسوسة ووالواردة ودورة

	E VI_REGISTERED AGENT and Florida street address (P.O. Box NOT	acceptable) of the registered agent is:
Name:	REGISTERED AGENTS INC	Bill Havre
Address:	7901 4th Street North, Ste 300	
	St. Petersburg. FL 33702	
ARTICLE The name	and address of the Incorporator is:	
Name:	David Edens	
Address:	2540 Shadowwood Drive	
	Tallahassee Florida 32305	
*******		reservene un for de order order de annoqueries de the place decienated in
this certific	en named as registered agent to accept servi cate, I am familiar with and accept the appo-	ice of process for the above stated corporation at the place designated in intment as registered agent and agree to act in this capacity
	Bel Jane	1/3/2019
	Required Signature/Registered Agent	Date
I submit th	ris document and affirm that the facts stated to the Department of State constitutes a third	I herein are true. I am aware that any false information submitted in a degree felony as provided for in s.817.155 F.S.
£	Required Signature Incorporator	1/18/19 Date