

P19000015998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

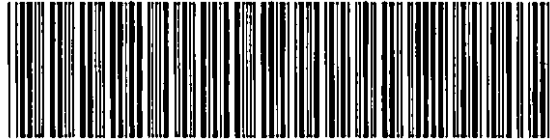
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000324608910

02/19/19--01037--028 \*\*105.00

FILED  
2019 FEB 19 AM 11:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 25 2019

K Brumpley

## COVER LETTER

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** NEW CREATION 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:

ROMAN ALBANO  
Contact Person

CONTRACTORS' REPORTING SERVICE INC.  
Firm/Company

13795 N NEBRASKA AVE  
Address

TAMPA, FL 33613  
City, State and Zip Code

INFO@ACTIVATEMYLICENSE.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROMAN ALBANO at ( 813 ) 445-7083  
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"/> \$113.75 Filing Fees and Certificate of Status	<input type="checkbox"/> \$113.75 Filing Fees and Certified Copy	<input type="checkbox"/> \$122.50 Filing Fees, 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.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

NEW CREATION BUILDERS, INC. #F18-113

Enter Name of Other Business Entity

2. The "Other Business Entity" is a FOREIGN 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 MARYLAND

(Enter state, or if a non-U.S. entity, the name of the country)

on 02/06/2013

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:

FLORIDA

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

New Creation Builders, 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.

**FILED**  
2019 FEB 19 AM 11:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Signed this 28TH day of JANUARY, 2019.

**Required Signature for Florida Profit Corporation:**

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

Printed Name: WILLIAM KINNEY Title: PRESIDENT

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

Signature: \_\_\_\_\_ 

Printed Name: WILLIAM KINNEY Title: PRESIDENT

Signature: [Signature] 

Printed Name: CHRISTINA KINNEY Title: SECRETARY

Signature: [Signature]

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

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.

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

**ARTICLE I    NAME**

The name of the corporation shall be: NEW CREATION BUILDERS, INC.

**ARTICLE II    PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address  
23230 LINDA LEE WAY

FT. MYERS, FL 33913

Mailing address, if different is:  
23230 LINDA LEE WAY

FT. MYERS, FL 33913

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

THE PURPOSE OF THE CORPORATION IS TO ENGAGE IN ANY LAWFUL ACTIVITY FOR  
WHICH A CORPORATION MAY BE ORGANIZED IN THE STATE OF FLORIDA.  
ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV    SHARES**

The number of shares of stock is: 10,000 TO BE HELD AT \$1.00 PAR VALUE EACH

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

Name and Title: WILLIAM KINNEY - P

Address: 23230 LINDA LEE WAY

FT. MYERS, FL 33913

Name and Title: CHRISTINA KINNEY - VP

Address: 23230 LINDA LEE WAY

FT. MYERS, FL 33913

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

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

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

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

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

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

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

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

**ARTICLE VI REGISTERED AGENT**

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

Name: WILLIAM KINNEY

Address: 23230 LINDA LEE WAY

FT. MYERS, FL 33913

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: WILLIAM KINNEY

Address: 23230 LINDA LEE WAY

FT. MYERS, FL 33913

\*\*\*\*\*

*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*

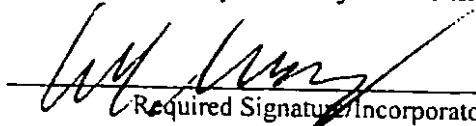
  
Required Signature/Registered Agent



02/05/2019

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.*

  
Required Signature/Incorporator



02/05/2019

Date