

P19000021713

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

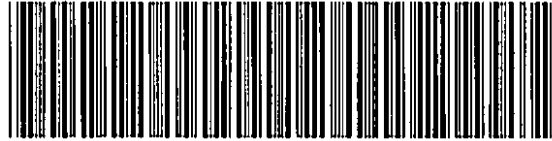
(Document Number)

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2019 MAR 12 PM 4:34
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
FEBRUARY 21 2019

February 21, 2019

CALVIN J REMENTER
3815 N US HWY 1, SUITE 66
COCOA, FL 32926

SUBJECT: SOS PLUMBING, INC
Ref. Number: W19000017283

We have received your document for SOS PLUMBING, INC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 719A00003698

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: SOS Plumbing, 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:

Calvin J Rementer

Contact Person

SOS Plumbing

Firm/Company

3815 N US Hwy 1, Suite 67 66

Address

Cocoa, FL 32926

City, State and Zip Code

sos@sosplumbingfl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Calvin J. Rementer at (321) 4804503

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$105.00 Filing Fees ☐ \$113.75 Filing Fees ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees.
and Certificate of Status 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.

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

SOS Plumbing, LLC - L16000475375
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)

on September 20, 2016
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:

Not Changed from Florida

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

SOS Plumbing, Inc.
Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: Jan 1, 2019
(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.

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FILING SECTION

Signed this 6 day of February, 20 19.

Required Signature for Florida Profit Corporation:

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

Incorporator: Calvin J. Rementer

Printed Name: Calvin J. Rementer Title: Member

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

Signature: Calvin J. Rementer

Printed Name: Calvin J. Rementer Title: Member

Signature: _____

Printed Name: _____ Title: _____

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.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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: SOS Plumbing, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address
3815 N US Hwy 1, Suite 67, Cocoa, FL 32926
66

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marcus C. Rementer/President
Address: 3815 N US Hwy 1, Suite 67
66
Cocoa, FL 32926

Name and Title: _____

Address: _____

Name and Title: Nikita L. Rementer/Secretary
Address: 3815 N US Hwy 1, Suite 67
66
Cocoa, FL 32926

Name and Title: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Calvin J. Rementer
Address: 3815 N US Hwy 1, Suite 67
66
Cocoa, FL 32926

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Calvin J. Rementer
Address: 3815 N. US Hwy 1 Ste 66
Cocoa FL 32926

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

Calvin J. Rementer
Required Signature/Registered Agent

2/6/19
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.

Calvin J. Rementer
Required Signature/Incorporator

2/6/19
Date